Case 18-15045 Doc 1 Filed Fill in this information to identify your case:	05/24/18 Entered	05/24/18 09:32:33 Desc Main f 62 witte states tankauptev court Northern district of Illinois
United States Bankruptcy Court for the:  Northern District of Illinois		MAY 24 2018
	Chapter you are filing under:  Chapter 7  Chapter 11  Shapter 12  Chapter 13	JEFFREY P. ALLSTEADT, CLERK INTAKE 2  Check if this is an
Official Form 101 Voluntary Petition for In	-	amended filing

# Voluntary Petition for Individuals Filing for Bankruptcy

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a 12/17 joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number

1. Your full name	About Debtor 1:	About Debtos 2 (S.
Write the name that is on you government-issued picture identification (for example, your driver's license or passport).  Bring your picture	First name  HERCE  Middle name  Last pame	About Debtor 2 (Spouse Only In a Joint Case):  First name  Middle name
identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Last name Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years	First name	First name
Include your married or maiden names.	Middle name	Middle name
	First name	Last name First name
	Middle name	Middle name
Only the last 4 digits of		Last name
number or federal ndividual Taxpayer	0xx - xx - 5 9 7 4	XXX - XXOR 9 xx - xx

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Debtor 1

Alan		Docume Docume
irst Name	Middle Name	Lest Name

Case number (if known)\_

4. Any business names and Employer Identification Numbers	About Debtor 1:  I have not used any business names or EINs.	About Debtor 2 (Spouse Only in a Joint Cas
(EIN) you have used in the last 8 years	F-W	
Include trade names and	Business name	Business name
doing business as names	Business name	
	- Marine	Business name
•	EIN	
	CIN	EIN
	EIN	_
		EIN — — — —
. Where you live	•	
	77- 1	If Debtor 2 lives at a different address:
	113 MAY ST	
	Number Street	Number Street
	MAI, and solve the state of	
	CALUMET CITY IL GOYGO	- 음 - (本) - (1)
	State ZIP Code	City State ZIP Coc
	County	[편집] [18]
•	If your marks	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	
		Number Street
	P.O. Box	P.O. Box
	<u> </u>	X
	City State ZIP Code	City State ZIP Code
The state of the s	在1000000000000000000000000000000000000	ZIF Coge
715 district to file for	Check one:	Charles
ankruptcy	Over the last 180 days before filing this petition,	Check one:
	I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any
	I have another reason. Evaluate	earth district.
	(See 28 U.S.C. § 1408.)	I have another reason. Explain.
	\(\frac{1}{2}\)	(See 28 U.S.C. § 1408.)

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Debtor 1

Case number (if known)

7. The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.
	☐ Chapter 11
	☐ Chapter 12
MANAGEMENT STORY OF THE STORY O	Chapter 13
8. How you will pay the fo	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is with a pre-printed address.
	I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).
· · · · · · · · · · · · · · · · · · ·	I request that my fee be waived (You may request this option only if you are filing for Chapter By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.
Have you filed for bankruptcy within the last 8 years?	No Yes. District NORWRW When 04/08/2019 Case number 13-14454
-	District 10.54 PM When 03/8/2014 Case number 14-09719  District 10.64 PM When 02/24/2017 Case number 17-05363  P.SHGL NORTHER When 11-02/2017 Case number 17-05363
Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business	☐ No ☐ Yes. Debtor
partner, or by an affiliate?	MM / DD / YYYY
	Debtor Relationship to you
	When Case number, if known
o you rent your esidence?	No. Go to line 12.  Has your landlord obtained an eviction judgment against you?  No. Go to line 12.
•	Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it as part of this bankruptcy petition.

Case number (if kno Report About Any Businesses You Own as a Sole Proprietor Part 3: 12. Are you a sole proprietor No. Go to Part 4. of any full- or part-time business? Yes. Name and location of business A sole proprietorship is a business you operate as an individual, and is not a Name of business, if any separate legal entity such as a corporation, partnership, or LLC. Number Street If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. State ZIP Code Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6)) ☐ None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it Chapter 11 of the can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your Bankruptcy Code and most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. For a definition of small business debtor, see No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in 11 U.S.C. § 101(51D). ☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ☑ No property that poses or is alleged to pose a threat Yes. What is the hazard? of imminent and identifiable hazard to public health or safety? Or do you own any property that needs If immediate attention is needed, why is it needed? \_\_\_\_ immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number City State ZIP Code Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy page 4

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Case 18-15045

Debtor 1

Case number (if known)

Part 5:

### Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:** 

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

htach a copy of the certificate and the payment plan, if any, that you developed with the agency.

(I received a briefing from an approved credit ocunseling agency within the 180 days before i filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement,

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

L.	J	I am not required to receive a briefing	about
		credit counseling because of:	

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not	required	to	receive	а	briefina	about
cred	it co	unselina	h	ocalies /			,

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-15045 Doc 1 Filed 05/24/18 Entered 05/24/18 09:32:33 Desc Main

Debtor 1

LATANA VE SHEEP YERWSON

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HAWSON Case number (# known)\_\_\_\_\_

Part 6: Answer These C	Questions for Reporting Pu	urposes			
16. What kind of debts do you have?	No. Go to line 16 Yes. Go to line 17  16b. Are your debts pr money for a business  No. Go to line 16c	<ul> <li>16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."</li> <li>☐ No. Go to line 16b.</li> <li>☑ Yes. Go to line 17.</li> <li>16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.</li> <li>☐ No. Go to line 16c.</li> <li>☐ Yes. Go to line 17.</li> <li>16c. State the type of debts you owe that are not consumer debts or business debts.</li> </ul>			
	Yes. Go to line 17				
17. Are you filing under Chapter 7?  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Ci administrative expe	administrative expenses are paid that funds will be available to distribute to unsecured creditors?  No			
18. How many creditors do you estimate that you owe?	1-49 50-99 100-199 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000		
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
eo. How much do you estimate your liabilities to be?  Cart 7: Sign Below	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
or you	If I have chosen to file under C	and I declare under penalty of perjury that the charter 7, I am aware that I may proceed, if I understand the relief available under each			
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.				
	Signature of Debtor 1  Executed on 05/24/3  MM / DD / 3	Signature of Executed or			

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	Date		
Signature of Attorney for Debtor		MM /	DD /YYYY
inted name			
m name			
imber Street		·	
,	State	ZIP Code	
ntact phone	Email address		
number	State		

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Debtor 1

Case number (if know

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page.

The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of

Bankruptcy Procedure, and the local rules of the be familiar with any state exemption laws that ar	court in which your case is filed. You must also oply.
Are you aware that filing for bankruptcy is a serio consequences?	ous action with long-term financial and legal
No Ves	
Are you aware that bankruptcy fraud is a serious inaccurate or incomplete, you could be fined or in No	crime and that if your bankruptcy forms are nprisoned?
Yes. Name of Person	an attorney to help you fill out your bankruptcy forms?
Attach Bankruptcy Petition Preparer's Notice	e, Declaration, and Signature (Official Form 119).
By signing here, I acknowledge that I understand thave read and understood this notice, and I am awattorney may cause me to lose my rights or proper	
Signature of Debtor 1	×
Date 05 R4 20 K	Signature of Debtor 2  Date
Contact phone	MM / DD / YYYY  Contact phone
Cell phone 313 - 874-3912	Cell phone
Email address	Email address

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

In Re: LATANIONE SHEARE ALKANSON	)	
Debtor (s)	)	Case No.
	)	Chapter [3
	)	

#### List of Creditors

Γ		
	MArrient	OAPHAL ONLO
	P1080K 9500	Pro Box 85520
<u> </u>	WIKES BAPPE PA 18723	[1904mond VA. 23285
	AARON SAVES 3 JEASE	DORTHOLD RELOVERY
	1015 COBB Place Bud NW	Poptfolio Recovery 120 corporate Bird ste 1
	Kennasaw GA 30144	NORGOIK VA 23502
	Midwest Recovery systems	GOST DREMOID BANK
10	2747 WINAYSH	FIRST PREMEIR BANK 3820 N Louise Ave
4	3 Aint-Charites MO (0230)	3820 N COURSE 1100
7	Post Dala Call	5/00x galls SD 57/07
\	Report DIVE BANK	JETTERSON CAPITALSYSTEMS
	Pio Box 98872	I've melehand for
	AS NOTAS NU 89192	SAINT DIONA MN 510303
	Numer OH Water Depart	# HEIDERLY ASSET MANAGEMENT
	PO BOX 1519/ Day pulaskired	Hordent Asset Monageneral 53 Pleimeter Oth Este 4
$\Box$	Alumetrity to 60409	ANTANISH GA 30344

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COMED POBOX Lell CAROL STREAM TL LOIGT	
CROWDER JAMINGPROPROCHE LLC GENEROS LAVE & BUILENDORP LLP 1000 TE 80th Place Ste 355 North MERRIVINE TAL 416410	
Comeast PID BOX 3001	
SOUTHEASTERN PA 19398 CITY OF CHICAGO DEPTOFFINANCE	
POBON 71429 CHICAGO TL 60694	
Coty of chicago pakking theress 2001e E. 95th St CHICAGO IL LOOGT	
City of Country Club HIIS  P.O. BOK 7690  CAROL Stream TI 60197	
Credit collection service Pro Box 55126	
Boston MA 02225	

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Fill in this information to iden	ntify your case:			
Debtor 1 First Name	5 SHERRE	<b>GREGUSON</b> Last Name		
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name		
United States Bankruptcy Court for	the: Northern District of I	linols	, .	
Case number (If known)				☐ Check if this is ar amended filing

#### Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

your original forms, you must fill out a new Summary and check the box at the top of this page.	a schedules after you file
Partick Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	Total of What you own
1a. Copy line 55, Total real estate, from Schedule A/B	\$
	1, 20 00
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 10,332,00
1c. Copy line 63, Total of all property on Schedule A/B	11-200 20
	\$ 10,230
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	Amount you owe
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	CANI 6
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ 2854.26
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	lingand
	+ \$ (1/77.00)
Your total liabilities	17.653.56
rota total natingles	\$ 1462.29
Part#3: Summarize Your Income and Expenses	
A. Schodida li Vauvilanama (Official Form 400)	
4. Schedule I: Your Income (Official Form 106i) Copy your combined monthly income from line 12 of Schedule I	, (362.00)
	77
5. Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22c of Schedule J	12000
	\$ 1 per 00

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AHANIQUE Sheller Felgusor Case number (If known)

Part 4: Answer These Questions for Administrative and Statistical Recor	ds	·
6. Are you filing for bankruptcy under Chapters 7, 11, or 13?		
No. You have nothing to report on this part of the form. Check this box and submit this Yes	s form to the court with your oth	er schedules.
7. What kind of debt do you have?		
Your debts are primarily consumer debts. Consumer debts are those "incurred by family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical pur	an individual primarily for a pers poses. 28 U.S.C. § 159.	onal,
Your debts are not primarily consumer debts. You have nothing to report on this p this form to the court with your other schedules.	art of the form. Check this box a	nd submit
<ol> <li>From the Statement of Your Current Monthly Income: Copy your total current monthly Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.</li> </ol>	income from Official	s 1362·00
9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F.  From Part 4 on Schedule E/F, copy the following:	Total claim	
9a. Domestic support obligations (Copy line 6a.)	\$	
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u>\$</u>	
9d. Student loans. (Copy line 6f.)	: 4340.00	
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+-\$	
9g. Total. Add lines 9a through 9f.	\$ 4340,00	

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Fill in this information to identify your case and t	his filing:	
Calariana Chris	· Figure 1	
Debtor 1 First Name Middle Name	PELQUSON	
Debtor 2		
(Spouse, if filing) First Name Middle Name	Last Name	
United States Bankruptcy Court for the: Northern District	of Illinois	
Case number		
•		Check if this is a
		amended filing
Official Form 106A/B	•	•
Schedule A/B: Proper	fv	
In each category, separately list and describe iter		12/15
category where you think it fits best. Be as compresponsible for supplying correct information. If it write your name and case number (if known). Anseases the property of the	NOI'R SDACR IS Needed, attach a senarate sheet to	this form. On the top of any additional pages
Do you own or have any legal or equitable inter	est in any residence, building, land, or similar pr	operty?
No. Go to Part 2.	,	, , , , , , , , , , , , , , , , , , ,
Yes. Where is the property?		
	What is the property? Check all that apply.	Do not deduct secured claims or exemptions. Put
f.1	Single-family home	the amount of any secured claims on Schedule D. Creditors Who Have Claims Secured by Property.
Street address, if available, or other description	<ul> <li>□ Duplex or multi-unit building</li> <li>□ Condominium or cooperative</li> </ul>	
,	Manufactured or mobile home	Current value of the current value of the entire property? portion you own?
- 1	- 🔲 Land	\$ \$
	Investment property	Y
City State ZIP Code	Timeshare	Describe the nature of your ownership interest (such as fee simple, tenancy by
		the entireties, or a life estate), if known.
	Who has an interest in the property? Check on	a.
County	Debtor 1 only Debtor 2 only	
County	Debtor 1 and Debtor 2 only	Check if this is community property
	At least one of the debtors and another	(see instructions)
	Other information you wish to add about this	item, such as local
If you own or have more than one, list here:	property identification number:	-
a year of the to more than one, fist riche.	What is the property? Check all that apply.	
	☐ Single-family home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D.
1.2. Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Claims Secured by Property.
and the second s	Condominium or cooperative	Current value of the Current value of the
	Manufactured or mobile home	entire property? portion you own?
	☐ Land ☐ Investment property	\$\$
City State ZIP Code	Timeshare	Describe the nature of your ownership
City State ZIP Code	Other	interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
	Who has an interest in the property? Check one.	and onlinears, or a me estate), if known.
	Debtor 1 only	
County	Debtor 2 only	
	Debtor 1 and Debtor 2 only	Check if this is community property
	I I Allegad a feet a second as	

Official Form 106A/B

At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

(see instructions)

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Case number (if known)

Last Name

Last Name

1.	3Street address, if available	or other description	What is the property? Check all that apply.  Single-family home Duplex or multi-unit building	the amount of any secure	aims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
	Outer address, ii available	, or other description	Condominium or cooperative  Manufactured or mobile home  Land	Current value of the entire property?	Current value of the portion you own?
	City	State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature interest (such as fee the entireties, or a life	simple, tenancy by
	•		Who has an interest in the property? Check one.		
	County		Debtor 1 only Debtor 2 only		
٠.			Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
		·	At least one of the debtors and another	(see instructions)	, ,
•			Other information you wish to add about this ite property identification number:	em, such as local	
			ll of your entries from Part 1, including any entrie		s
you	nave attached for Part 1.	Write that number h	nere		
	and the state of t			والمنافقة والمنا	的分别的"一种可以在心理可能的。""我们是我们的,那么如何的心,我们可以不会会的不少的。""我们,在他的人,我们们
Part 2	Describe Your Ve	, shialaa			,
	Beschibe Tour Ve			· · · · · · · · · · · · · · · · · · ·	
3. Cars	s, vans, trucks, tractors, s No		e, also report it on Schedule G: Executory Contracts and motorcycles	and Unexpired Leases.	
	/es				
3,1.	Make:	JUSSAN	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
	Model: <u>(</u>	NAMMA	Debtor 1 only	the amount of any secured Creditors Who Have Claim	claims on Schedule D:
	Year: _	2005	Debtor 2 only	Current value of the	ينود وياريانك ورطامونهاي كالمانوياتية بالاحتاد والمانات
	Approximate mileage:	196.000	Debtor 1 and Debtor 2 only  At least one of the debtors and another	entire property?	portion you own?
	Other information:		At least one of the deplots and another	1 ~~~~	0
÷		·	Check if this is community property (see instructions)	\$ 2,500,00	\$ 2.50000
lf you	own or have more than or	ne, describe here:			Massey, Apply - Advy,
3.2.	Make:	•	Who has an interest in the property? Check one.	Do not deduct secured claim	me or avamation. Dut
	Model:	·····	☐ Debtor 1 only	the amount of any secured	claims on Schedule D:
	Year:		Debtor 2 only	Creditors Who Have Claim	
	Approximate mileage:		Debtor 1 and Debtor 2 only		Current value of the portion you own?
	-		At least one of the debtors and another	· · · · · · · · · · · · · · · · · · ·	paraon you ontil
	Other information:		☐ Check if this is community property (see	\$	\$
			instructions)	THE TANK TANK	-
	M-11			·	*
					1
					Î

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Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Debtor 1 only Model: Debtor 2 only Year: Current value of the Debtor 1 and Debtor 2 only Current value of the entire property? Approximate mileage: portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Debtor 1 and Debtor 2 only Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☐ No ☐ Yes Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions, Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. 4.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D; Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year. Debtor 1 and Debtor 2 only Current value of the Current value of the entire property? portion you own? Other information: At least one of the debtors and another Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

Part 3:

**Describe Your Personal and Household Items** 

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Do you own or have any legal or equitable interest in any of the following items?		Current value of the portion you own?
		Do not deduct secured claims or exemptions.
6. Household goods and furnishings		A CAMPAGE SERVICES
Examples: Major appliances, furniture, linens, china, kitchenware		
D 40-		* <b>.</b>
TYes. Describe 3 tus, 509th, COUCHES, TA	ishe, le cupies, Bench	] \$ [1850,00
7. Electronics		•
Examples: Televisions and radios; audio, video, stereo, and digital equipment; composition collections; electronic devices including cell phones, cameras, media play		
Yes. Describe 3 T.VS 4 cell Phones 1 pan	he I KBOK 360	\$ 1,700.00
8. Collectibles of value		<b>-</b>
	O	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, stamp, coin, or baseball card collections; other collections, memorabilia, or		
Yes. Describe		\$
9. Equipment for sports and hobbies	<del></del>	_
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, poo and kayaks; carpentry tools; musical instruments	ol tables, golf clubs, skis; canoes	
□ No		1 A
Yes, Describe		] <u>\$ 250.00</u>
10. Firearms		•
Examples: Pistols, rifles, shotguns, ammunition, and related equipment		
A No		
Yes. Describe		<b>1</b> s.
		4
11. Clothes		•
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  No		100
Yes. Describe	y clothes	s_11000.00
V · · · · ·		
12. Jewelry  Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heiri gold, silver	ioom jeweiry, watches, gems,	,
☑ No ☐ Yes. Describe		\$
<u> </u>		*
13. Non-farm animals  Evamples: Dons, cats, birds, borses	•	
Examples: Dogs, cats, birds, horses		:
☑ No		
Yes. Describe		\$
14. Any other personal and household items you did not already list, including any h	health aids you did not list	, and the second
<b>②</b> №		·
Yes. Give specific Information		\$
15. Add the dollar value of all of your entries from Part 3, including any entries for part 3. Write that number here		\$ 4800.00
TOT I MIL VI TATILO DI DE TIDITO DE	······································	

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Part 49 Describe Yo	our Financial Assets			
Do you own or have any	legal or equitable interest in	any of the following?		Current value of the portion you own?
				Do not deduct secured claims
				or exemptions.
16. Cash				
Examples: Money you	have in your wallet, in your hor	me, in a safe deposit box, and on hand when you	ı file your petition	
No No	•	•	$\sim$	<i></i> ₹
☐ Yes			Cash:	\$
	•		•	
17. Deposits of money				
Examples: Checking, and others	savings, or other financial acco similar institutions. If you have n	unts; certificates of deposit; shares in credit unionultiple accounts with the same institution, list ea	ns, brokerage nouses. ich.	
□ No				بطير
☐ Yes		Institution name:		432,00
		CHIME BANK CARD	•	. How asd
•	17.1. Checking account:			3
	17.2. Checking account:			\$
•	17.3. Savings account:			\$
	17.4. Savings account:	***************************************		\$
•	17.5. Certificates of deposit:			\$
	17.6. Other financial account:	·		<b>\$</b>
	17.7. Other financial account:			\$
•	17.8, Other financial account			· s
	17.9, Other financial account:		·	•
	· ·	. •	-	Ψ
•			•	
18. Bonds, mutual funds.	, or publicly traded stocks	·		
		erage firms, money market accounts		•
☑ No				
☐ Yes	Institution or issuer name:	•		
	***************************************			\$
			··	\$
				5
				,
		rated and unincorporated businesses, includ	ling an interest in	
an/LLC, partnership,	and joint venture			
No Character	Name of entity:		% of ownership:	
Yés. Give specific information about	*		0.0%	\$
them		-	0% %	\$
				\$
,				
•				

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zo. Gordinmont and Gorp		ante	
Negotiable instruments	prate bonds and other negotiable and non-negotiable instrum nclude personal checks, cashiers' checks, promissory notes, and		
Non-negotiable instrum	ents are those you cannot transfer to someone by signing or delive	ering them.	•
☑ No	•		
Yes. Give specific	Issuer name:		
information about them			\$
uicii			*
•			\$ \$
			P
21. Retirement or pension	accounts		
_	A, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other	r pension or profit-sharing plans	•
DI No .		•	
Yes. List each		,	
account separately.	Type of account: Institution name:		
	401(k) or similar plan:		<b>5</b>
*	· .	-	•
	Pension plan:		,
	IRA:		, )
	Retirement account:		
	Keogh:	·	;
	Additional account		
	Additional account:		-
Examples: Agreements to companies, or others	deposits you have made so that you may continue service or use ith landlords, prepaid rent, public utilities (electric, gas, water), tel	ecommunications	
U No			
Yes	Institution name or individual:		•
	Electric:	<u> </u>	
		· · · · · · · · · · · · · · · · · · ·	
•	Gas:	·	
	Gas:  Heating oil;	\$s	
		\$ 	1.00000
· ·	Heating oil: Security deposit on rental unit: EIST 9/MYW	\$	1,00000
	Heating oil: Security deposit on rental unit: EIST 9M,4M Prepaid rent:	\$	1,00000
	Heating oil: Security deposit on rental unit: FIST 9/M/H/ Prepaid rent: Telephone:	\$	1,0000
	Heating oil:  Security deposit on rental unit: EIST 9/N/H/  Prepaid rent:  Telephone:  Water:	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1,0000
	Heating oil:  Security deposit on rental unit: FIST 9/M4V  Prepaid rent:  Telephone:  Water:  Rented furniture:	\$	1,00000
	Heating oil:  Security deposit on rental unit: EIST 9/N/H/  Prepaid rent:  Telephone:  Water:	\$. \$. \$. \$. \$. \$. \$. \$. \$. \$. \$. \$. \$. \$	1,0000
	Heating oil:  Security deposit on rental unit: FIST 9/M4V  Prepaid rent:  Telephone:  Water:  Rented furniture:  Other:	\$. \$. \$. \$. \$. \$. \$. \$. \$. \$. \$. \$. \$. \$	1,0000
· 1	Heating oil:  Security deposit on rental unit: FIST 9/M4V  Prepaid rent:  Telephone:  Water:  Rented furniture:	\$	1,0000
3. Annuities (A contract for	Heating oil:  Security deposit on rental unit: FIST 9/M4V  Prepaid rent:  Telephone:  Water:  Rented furniture:  Other:	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1,0000
· 1	Heating oil:  Security deposit on rental unit: FIST 9/M4V  Prepaid rent:  Telephone:  Water:  Rented furniture:  Other:	\$	1,0000
☑ No	Heating oil:  Security deposit on rental unit: FIGT 9/M4  Prepaid rent:  Telephone:  Water:  Rented furniture:  Other:	\$	1,0000
☑ No	Heating oil:  Security deposit on rental unit: FIGT 9/M4  Prepaid rent:  Telephone:  Water:  Rented furniture:  Other:	\$	1,0000

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Case number (if known)

Debtor 1

26 U.S.C. §§ 530(b)(1), 529A(b)	in an account in ), and 529(b)(1).				•
M No	.,	-			
	Inefitution name	and description Co	narotoly file the rece	rds of any interests.11 U.S.C. § 5	74/~\•
	moutulon name a	and description. Se	parately life trie recor	ds of any interests. 11 0.5.0. 9 5	2 i(C).
· ·			***************************************		\$
· · · · · · · · · · · · · · · · · · ·					s
·					e
25. Trusts, equitable or future inte exercisable for your benefit	rests in propert	ly (other than any	thing listed in line 1	), and rights or powers	
₽ No		•			
Yes. Give specific			<del></del>		
Information about them					s
·					
6. Patents, copyrights, trademark					
Examples: Internet domain name	es, websites, pro	ceeds from royaltie	s and licensing agree	ements	
☑ No			<del></del>		
Yes. Give specific	٠		•		
information about them					\$
·					<del></del>
<ol> <li>Licenses, franchises, and othe Examples: Building permits, excli</li> </ol>			tion holdings, liquor li	censes, professional licenses	
₽ N°				•	
Yes. Give specific	r				<b>-</b>
information about them					\$
B. Tak refunds owed to you	· · · · · · · · · · · · · · · · · · ·	******* ******************************			Do not deduct secured claims or exemptions.
Yes. Give specific information	, [				
about them, including wh	hether	,	•	Federal: .	\$
you already filed the retu and the tax years				State:	\$
and the tax years,				Local:	\$
•	L				
9. Family support					
	alimony, spousa	ıl support, child sup	port, maintenance, d	ivorce settlement, property settler	nent
Examples: Past due or lump sum	alimony, spousa	ıl support, child sup	port, maintenance, d	ivorce settlement, property settler	nent
Examples: Past due or lump sum	,	al support, child sup	port, maintenance, d	ivorce settlement, property settler	nent
Examples: Past due or lump sum	,	al support, child sur	oport, maintenance, d	ivorce settlement, property settler Alimony:	nent \$
Examples: Past due or lump sum	,	al support, child sur	oport, maintenance, d		s
Examples: Past due or lump sum	,	al support, child sur	port, maintenance, d	Alimony:	\$ \$
Examples: Past due or lump sum	,	al support, child sur	port, maintenance, d	Alimony: Maintenance:	\$ \$ \$
Examples: Past due or lump sum	,	al support, child sup	port, maintenance, d	Alimony: Maintenance: Support Divorce settlement	\$ \$
Examples: Past due or lump sum No Yes. Give specific information	1	al support, child sup	port, maintenance, d	Alimony: Maintenance: Support	\$ \$ \$
Examples: Past due or lump sum No No Yes. Give specific information	you ity insurance payr	ments, disability be	enefits, sick pay, vaca	Alimony: Maintenance: Support Divorce settlement Property settlement:	\$\$ \$\$ \$\$
Examples: Past due or lump sum No Yes. Give specific information Other amounts someone owes y Examples: Unpaid wages, disabilit	you ity insurance payr	ments, disability be	enefits, sick pay, vaca	Alimony: Maintenance: Support Divorce settlement Property settlement:	\$\$ \$\$ \$\$
Examples: Past due or lump sum  No  Yes. Give specific information  Other amounts someone owes setamples: Unpaid wages, disability Social Security benefits	you ity insurance payr ts; unpaid loans y	ments, disability be	enefits, sick pay, vaca	Alimony: Maintenance: Support Divorce settlement Property settlement:	\$\$ \$\$ \$\$
No  Yes. Give specific information  Other amounts someone owes to be a complex of the complex of	you ity insurance payr ts; unpaid loans y	ments, disability be	enefits, sick pay, vaca	Alimony: Maintenance: Support Divorce settlement Property settlement:	\$\$ \$\$ \$\$

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Case number (# Kinchin)

31.'Interests' In insurance policies  Examples: Health, disability, or life insurance  No	ce; health savings account (HSA);	credit, homeowner's, or renter's insurance	
Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
,			\$
		<del> </del>	<u> </u>
			\$
32. Any interest in property that is due you if you are the beneficiary of a living trust, expreperty because someone has died.  10 No		e policy, or are currently entitled to receive	
Yes. Give specific information		, , , , , , , , , , , , , , , , , , ,	\$
33. Claims against third parties, whether or Examples: Accidents, employment disputes  No  Yes. Describe each claim		- · ·	
<u> </u>			\$
34. Other contingent and unliquidated claims to set off claims  21 No	s of every nature, including cour	nterclaims of the debtor and rights	
Yes. Describe each claim	,		\$
35. Any financial assets you did not already	ist		
<u>√</u> No	The state of the s		and March Mark
Yes. Give specific information			\$
36. Add the dollar value of all of your entries for Part 4. Write that number here	from Part 4, including any entric	es for pages you have attached	:1032:00
•			
Part 5: Describe Any Business-R	•	or Have an Interest In. List any	real estate in Part 1.
37. Do you own or have any legal or equitable	e interest in any business-related	d property?	
☐ No. Go to Part 6: ☐ Yes. Go to line 38.	•		
Tes. Go to line 36.		•	Current value of the
			portion you own?  Do not deduct secured claims or exemptions.
38. Accounts receivable or commissions you	already earned		T. Dir. P. Carlotte
□ No		*	of the state of th
Yes. Describe			<b>s</b>
39. Office equipment, furnishings, and suppli Examples: Business-related computers, software, r		s, rugs, telephones, desks, chairs, electronic devices	The state of the s
☐ No ☐ Yes. Describe			
Tes, pescipe	***************************************		<b></b>

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Case number (if locater)

46. Michinory, fictures, equipment, supplies you use in business, and tools of your trade    No   No   Yes. Describe	,		
Yes. Describe	40. Machinery, fixtures, e	quipment, supplies you use in business, and tools of your trade	
14. Inventory   No   Yes. Describe   14. Inventory   No   Yes. Describe   14. Inventory   No   Yes. Describe   15. No   Yes. Describe   15. No   Yes. Describe   16. No   16. No   Yes. Describe   16. No	□ No		
14. Inventory   No   Yes. Describe   14. Inventory   No   Yes. Describe   14. Inventory   No   Yes. Describe   15. No   Yes. Describe   15. No   Yes. Describe   16. No   16. No   Yes. Describe   16. No	Yes, Describe		]
No   Yes, Describe			9
No   Yes, Describe	· · · <del>-</del>		•
No   Yes, Describe	41 Inventory		
Yes. Describe			· <del>-</del> 1
### ### ##############################			¢ ·
No   Yes. Déscribe			<u> </u>
No   Yes. Déscribe			
Yes, Describe	42.Interests in partnershi	ps or joint ventures	
Yes, Describe	□ No		
43. Customer lists, mailing lists, or other compliations   No		Not our crohing	
43. Customer lists, mailing lists, or other compilations   No		Name of entity.	
43. Customer lists, mailing lists, or other compilations   No	•	<u> </u>	\$
No   Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?   No   Yes. Describe	,	<u> </u>	\$
No   Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?   No   Yes. Describe		%	\$
No   Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?   No   Yes. Describe			
Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?   No		g lists, or other compilations	
No	☐ No		
44. Any business-related property you did not already list   No	Yes. Do your lists	include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	•
44. Any business-related property you did not already list    No   Yes. Give specific	□ No		
44. Any business-related property you did not already list    No   Yes. Give specific	☐ Yes, Descr	ibe	,
44. Any business-related property you did not already list   No   Yes. Give specific information   \$   \$   \$   \$   \$   \$   \$   \$   \$   \$		·	\$
No   Yes. Give specific information   \$   \$   \$   \$   \$   \$   \$   \$   \$			
No   Yes. Give specific information   \$   \$   \$   \$   \$   \$   \$   \$   \$	44. Any business-related (	property you did not already list	•
### standard in the standard i	☐ No		
\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Yes. Give specific		<b>c</b>
\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	information		<b>3</b>
\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			\$
\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	•		\$
\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			
\$			<b>&gt;</b>
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. if you own or have an interest in farmland, list it in Part 1.  46. Do/you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Go to Part 7.  Yes. Go to line 47.  Current value of the portion you own?  Do not deduct secured claims or exemptions.  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No  Yes			\$
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. if you own or have an interest in farmland, list it in Part 1.  46. Do/you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Go to Part 7.  Yes. Go to line 47.  Current value of the portion you own?  Do not deduct secured claims or exemptions.  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No  Yes			\$
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. if you own or have an interest in farmland, list it in Part 1.  46. Do/you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Go to Part 7.  Yes. Go to line 47.  Current value of the portion you own?  Do not deduct secured claims or exemptions.  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No  Yes	•		T
Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  If you own or have an interest in farmland, list it in Part 1.  45. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Go to Part 7.  Yes. Go to line 47.  Current value of the portion you own?  Do not deduct secured claims or exemptions.  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No  Yes			\$
If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Go to Part 7.  Yes. Go to line 47.  Current value of the portion you own?  Do not deduct secured claims or exemptions.  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No  Yes	for Part 5. Write that n	umber here	,
If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Go to Part 7.  Yes. Go to line 47.  Current value of the portion you own?  Do not deduct secured claims or exemptions.  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No  Yes			
If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Go to Part 7.  Yes. Go to line 47.  Current value of the portion you own?  Do not deduct secured claims or exemptions.  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No  Yes	CONTROL DAMAGE CONTROL		
If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Go to Part 7.  Yes. Go to line 47.  Current value of the portion you own?  Do not deduct secured claims or exemptions.  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No  Yes	Pari 69 Describe An	v Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.	
✓ No. Go to Part 7.  ☐ Yes. Go to line 47.  Current value of the portion you own?  Do not deduct secured claims or exemptions.  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  ☐ No ☐ Yes	if you own or	have an interest in farmland, list it in Part 1.	
✓ No. Go to Part 7.  ☐ Yes. Go to line 47.  Current value of the portion you own?  Do not deduct secured claims or exemptions.  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  ☐ No ☐ Yes	<u> </u>		
✓ No. Go to Part 7.  ☐ Yes. Go to line 47.  Current value of the portion you own?  Do not deduct secured claims or exemptions.  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  ☐ No ☐ Yes	46. Do you own or have an	y legal or equitable interest in any farm- or commercial fishing-related property?	
☐ Yes. Go to line 47.  Current value of the portion you own?  Do not deduct secured claims or exemptions.  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  ☐ No ☐ Yes			i L
Current value of the portion you own?  Do not deduct secured claims or exemptions.  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No Yes			\$2 }
portion you own?  Do not deduct secured claims or exemptions.  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No  Yes	•		
Do not deduct secured claims or exemptions.  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No  Yes			
or exemptions.  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No  Yes	\$ ·		
Examples: Livestock, poultry, farm-raised fish  No Yes	•		
□ No □ Yes	47. Farm animals		JIII A
☐ Yes	Examples: Livestock, po	ultry, farm-raised fish	į
☐ Yes	☐ No		1
<b>\$</b>			,
	L.		\$

Debtor 1

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Case number (if known)

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Case number (if known)

	•
48. Crops—either growing or harvested	•
O No .	
Yes. Give specific information	\$
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
O Yes	
	\$
50. Farm and fishing supplies, chemicals, and feed	
□ No	
☐ Yes	\$
Tre Anni form and communication in the related annuality and already that	
51. Any farm- and commercial fishing-related property you did not already list  No	
Yes. Give specific information	\$
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you	have attached e
for Part 6. Write that number here	→   •
Part 7: Describe All Property You Own or Have an Interest in That You	Did Not List Above
53. Do you have other property of any kind you did not already list?	•
Examples: Season tickets, country club membership	
Chly 30 all as 3000 March 1 aloues	
Yes. Give specific CITY 07 CHICAGOPARICNG TREWELS	Ψ
507551731D BS, 000.00	\$
<u> </u>	
54. Add the dollar value of all of your entries from Part 7. Write that number here	→ \$ \$1000.00
Part 8: List the Totals of Each Part of this Form	-
55. Part 1: Total real estate, line 2	
56. Part 2: Total vehicles, line 5 \$ <u>2.500-00</u>	
57. Part 3: Total personal and household items, line 15	T THE CONTRACT OF THE CONTRACT
58. Part 4: Total financial assets, line 36 \$\left(\)	· ·
59. Part 5: Total business-related property, line 45	and of the control of
50. Part 6: Total farm- and fishing-related property, line 52	nor en contrara
51. Part 7: Total other property not listed, line 54 +\$\(\frac{\int}{2}\cdot \times 00 \cdot 00\)	The state of the s
52. Total personal property. Add lines 56 through 61 \$ 10,322-00 Copy	11 200 00
T	personal property total > + \$ 10.322.00
	personal property total → + \$ \( \( \text{\$\frac{1}{3}\text{\$\frac{1}\text{\$\frac{1}{3}\text{\$\frac{1}{3}\$\frac{1

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Fill in this i	nformation to iden	tify your case:	the of the superior		
Debtor 1	LA FANIGUE	Shelte Middle Name	Felguson Laut Name		
Debtor 2 (Spouse, if filing	<u> </u>	Middie Name	Lust Name		
United States	: Bankruptcy Court for	the: Northern Distric	t of Illinois		•
Case number	Г <u></u>	· · · · · · · · · · · · · · · · · · ·			Check if t amended

#### Official Form 106C

#### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

P	art 1. Identify the Property You Claim as Exempt		
1.	Which set of exemptions are you claiming? Check one only, even if  ☐ You are claiming state and federal nonbankruptcy exemptions. 11  ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)		
2.	For any property you list on Schedule A/B that you claim as exem	pt, fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property  Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
	Brief description: 2005 N.55NN MAH MAS 2,500.00 Line from Schedule A/B: 31	□ \$_\(\text{\left}\) \$\(\text{\left}\) \$\(\text	
	Brief 3 WV Schas Covales \$ 185000 Line from Schedule A/B:	□ s 1.850.00 □ 100% of fair market value, up to any applicable statutory limit	
	Brief description:  Line from Schedule A/B:  Brief Dictagling (10thes \$ 1000.00	□ \$	
3.	Are you claiming a homestead exemption of more than \$160,375?  (Subject to adjustment on 4/01/19 and every 3 years after that for case  No  Yes. Did you acquire the property covered by the exemption within  No  Yes		

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Brief descrip on Schedule	tion of the property and line A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	0 + 1 applicable	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from Schedule A/B	3 tuis 4 celipiones penice 1x62x3/00	s 1700·00	☐ \$	
Brief description: Line from	3 Bicycles	\$ 250.00	□ \$ <u>\$0.00</u> □ 100% of fair market value, up to any applicable statutory limit	
Schedule A/B.	:		any approadic statutory mine	
Brief description: Line from Schedule A/B.	Scuply Deposit	\$ 11000.00	□ \$	
Brief description: Line from Schedule A/B:		\$	☐ \$	
Brief description:	gargangga Anaghadhadaga Alden maddhalamagan ay ah minda bahanin Alabadhadhanin	\$	<b>Q</b> \$	
Line from Schedule A/B:	·		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$ 100% of fair market value, up to	·
Line from Schedule A/B:	,		any applicable statutory limit	
Brief description:		\$	<b></b>	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	The Published Managament and Associated Asso
Brief description:		\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$	<u></u> \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<u></u> \$	
Line from . Schedule A/B;	<del></del> ::		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>Q</b> \$	
Line from Schedule A/B:		•	100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>-</b> \$	
Line from Schedule A/B:		·	☐ 100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your ca	Se:		
Debtor 1 LATAWIQUE Shell	EE FEIGUSON Last Name		
Debtor 2 (Spouse, if filing) First Name Middle	Name Last Name		•
United States Bankruptcy Court for the: Northern	District of Illinois		
Case number(If known)			eck if this is an
Official Form 106D	s Who Have Claims Secur		nended filing
	,		12/15
information. If more space is needed, copadditional pages, write your name and ca  1. Do any creditors have claims secured!  No. Check this box and submit this for Yes. Fill in all of the information below	by your property?  m to the court with your other schedules. You have noth	and attach it to this form. On the to	rrect op of any
Part 1: List All Secured Claims		- AZONISTA PIENTIS I POLISTIS ZVANATORIJA SALIJA	or and the Englishment's English
for each claim. If more than one creditor h	nore than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Column A Column B Amount of claim Do not deduct the value of collateral claim	Contraction of the second contract of the cont
2.1	Describe the property that secures the claim:	\$\$	
Creditor's Name  Number Street	,		
City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	,	
Who owes the debt? Check one.	Nature of lien. Check all that apply.	•	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	An agreement you made (such as mortgage or secured car loan)     Statutory lien (such as tax lien, mechanic's lien)     Judgment lien from a lawsuit     Other (including a right to offset)	· · ·	
Date debt was incurred	Last 4 digits of account number		
2.2	Describe the property that secures the claim:	\$\$	\$
Creditor's Name			,
Number Street			
City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	•	
Who owes the debt? Check one.	Nature of lien. Check all that apply.		
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	□ An agreement you made (such as mortgage or secured car loan)     □ Statutory lien (such as tax lien, mechanic's lien)     □ Judgment lien from a lawsuit		
Check if this claim relates to a	Other (including a right to offset)		

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

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· ·			
Additional Page Part 1: After listing any entries on this p by 2.4, and so forth.	age, number them beginning with 2.3, followed	Column A ———————————————————————————————————	Column B Column C Value of collateral Unsecured that supports this portion a claim If any
		¢	· \$
	Describe the property that secures the claim:	<u> </u>	Ψ
Creditor's Name			
Number Street	·		
	As of the date you file, the claim is: Check all that apply.		
	☐ Contingent		'
City State ZIP Code	☐ Unliquidated		
City State Live State	☐ Disputed		
Who owes the debt? Check one.	Nature of lien. Check all that apply.		
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)		,
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)		*
	Judgment lien from a lawsuit		
At least one of the debtors and another	Other (including a right to offset)		•
☐ Check if this claim relates to a community debt			
	Last 4 digits of account number		
Date debt was incurred	Last 4 tights of account number	·	
	Describe the property that secures the claim:	\$	\$\$
Creditor's Name	1	1	•
		Ì	
Number Street			
	As of the date you file, the claim is: Check all that apply.	•	
	☐ Contingent		
	☐ Untiquidated	•	
City State ZIP Code	☐ Disputed		
Who owes the debt? Check one.	·		
	Nature of lien. Check all that apply.		
Debtor 1 only	An agreement you made (such as mortgage or secured		
Debtor 2 only	car loan)		
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)		
At least one of the debtors and another	Judgment lien from a lawsuit		
☐ Check if this claim relates to a	Other (including a right to offset)	-	
community debt			
<u> </u>		•	
Date debt was incurred	Last 4 digits of account number		
	Describe the property that secures the claim:	\$	\$\$
Creditor's Name		3	
Number Street .		,	
- ,		j .	
	As of the date you file, the claim is: Check all that apply.		
	☐ Contingent	•	,
City State ZIP Code	☐ Unliquidated		
·	☐ Disputed		
Who owes the debt? Check one.	Nature of lien. Check all that apply.		•
-	1.5		
☐ Debtor 1 only .	An agreement you made (such as mortgage or secured		
Debtor 2 only	car loan)		
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)		
At least one of the debtors and another	Judgment lien from a lawsuit		
Check if this claim relates to a	Other (including a right to offset)		
community debt			
Date debt was incurred	Last 4 digits of account number	<u> </u>	
	in Column A on this page. Write that number here:	\$	
	add the dollar value totals from all pages.	ls	
Write that number here:		<u> </u>	

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25	rt 2: L	ist Others to B	e Notified for	a Debt 1	hat You Alread	y Listed
Use	e this page	only if you have o	others to be notify you for a debt your for any of the	ied about y ou owe to s lebts that y	your bankruptcy for comeone else, list the you listed in Part 1,	a debt that you already listed in Part 1. For example, if a collection he creditor in Part 1, and then list the collection agency here. Similarly, if list the additional creditors here. If you do not have additional persons to
_						On which line in Part 1 did you enter the creditor?
╝			·	·····		Last 4 digits of account number
	Name		•			
	Number	Street				
	City	-	,	State	ZIP Code	
		-	***************************************		<u></u>	On which line in Part 1 did you enter the creditor?
	News		*		-	Last 4 digits of account number
	Name			٠		•
	Number	Street				<del>-</del> ,
				_		<u> </u>
	City			State	ZIP Code	·
						On which line in Part 1 did you enter the creditor?
	Name	*				Last 4 digits of account number
	Name					,
	Number	Street			<u> </u>	·····
						<del>.</del>
•				,		.`
	City			State	ZIP Code	
						On which line in Part 1 did you enter the creditor?
	Name					Last 4 digits of account number
		•				
	Number.	Street				<del>-</del>
			,			
	City			State	ZIP Code	
	<del></del>					On which line in Part 1 did you enter the creditor?
	Name				-	Last 4 digits of account number
	Number	Street.	·			
						<del>_</del> ,
		-				<u>.                                      </u>
	City			State	ZIP Code	200 Color of the C
					,	On which line in Part 1 did you enter the creditor?
	Name					Last 4 digits of account number
	Number	Street		-		
					·	
,	City			State	ZIP Code	

Case 18-15045 Doc 1 Filed 05/24/18 Entered 05/24/18 09:32:33 Desc Main 28 of 62 Fill in this information to identify your case: Debtor 1 Debtor 2 Middle Name (Spouse, if filing) First Name United States Bankruptcy Court for the: Northern District of Illinois ☐ Check if this is an amended filing Case number (If known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). List All of Your PRIORITY Unsecured Claims Part 1 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Priority Nonpriority amount Total claim Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Wiro incurred the debt? Check one. Disputed Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated is the claim subject to offset? Other, Specify □ No Yes Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply ☑ Confingent Unliquidated ☐ Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated is the claim subject to offset? ☐ No Yes

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Rati the Your PRIORITY Unsecured Claims — Continuation Page							
After listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim Priority Nonpriority amount amount					
Priority Creditor's Name    West The Start Blud   Number Street	Last 4 digits of account number $UUDS$ When was the debt incurred?	\$ <u>588.45</u> \$ <u>588.45</u> \$					
City TU COCC4	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed						
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government						
☐ At least one of the debtors and another☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated  Other. Specify 6A5 Bill						
Is the claim subject to offset? ☐ No ☐ Yes		10 10 20 15 05 05					
CALUNET CITY WATER DEPT Priority Creditor's Name  AH DV ASK, Rd Number Street	When was the debt incurred?	\$ 1200.00 \$ 1200.00\$					
CALUMENT CITY TI 60409 City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed						
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other, Specify						
Is the claim subject to offset?  No Yes	Otter, Specify						
CITY OF CHURGO DEPT FINANCE		\$ 940.00 \$ 540.00 \$					
Chlicago TL 60694	When was the debt incurred?						
City State ZIP Code  Who incurred the debt? Check one.	Unliquidated Disputed  Type of PRIORITY unsecured claim:						
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated						
☐ Check if this claim is for a community debt  Is the claim subject to offset? ☐ No	Other, Specify						

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Desc Main

List All of Your NONPRIORITY Unsecured Claims Part 2: 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Last 4 digits of account numb When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent ☐ Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another ☐ Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify ☐ No ☐ Yes Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another ☐ Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify ☐ No Yes 102100 Last 4 digits of account number -2007 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Obligations arising out of a separation agreement or divorce ☐ Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? □ No Other, Specify ☐ Yes

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Part 21 Your NONPRIORITY Unsecured Claims - Continua		
After listing any entries on this page, number them beginning with 4	.4, followed by 4.5, and so forth.	Total claim
Midwest Renovery systems	Last 4 digits of account number 8024	5/1400
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street NARIES IND 6330/	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☑ Contingent ☐ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Is the claim subject to offset?	Circles Specify	
☐ Yes	•	
	0100	0000
- ( Ped + Dalo BANK	Last 4 digits of account number 1 1 3	\$ 858:00
Nonpriority Creditor's Name	When was the debt incurred? 3/1/2015	
Nymber Street NV 8993	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unfiquidated ☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other, Specify Charles PUBL	
☐ No ☐ Yes		
lud 105	10117	\$ 855.0
- Capidal rale	Last 4 digits of account number $\frac{1}{\sqrt{2}} \times \frac{4}{\sqrt{2}} \times \frac{7}{\sqrt{2}}$	<u> </u>
Nonpriority Creditor's Name  O D BOX 85520	When was the debt incurred? 10/1/2014	•
Number Street 11A 23355	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset?	Other, Specify	
☐ No ☐ Yes		
La Tes		

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Fill in this ir	nformation to identify	your case:		
Debtor 1	LAGANIÐUE First Name	SHEBEL Middle Name	Last Name	<u> </u>
Debtor 2 (Spouse, if filing	) First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the	: Northern District of	f Illinois	
Case number (If known)				

## Official Form 106E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

any a	dditional pages, write your name and case num	ber (if known).			
Part	1: List All of Your PRIORITY Unsecure	d Claims	<u> </u>		
2. L ea	ach claim listed, identify what type of claim it is. If o	ditor has more than one priority unsecured claim, list it claim has both priority and nonpriority amounts, list the laims in alphabetical order according to the creditor's part 1. If more than one creditor holds a particular clai	name. If yo m, list the c	u have more than	a two priority Part 3.
2.1	Priority Creditor's Name	Last 4 digits of account number	\$	<u> </u>	\$
e de la composiçõe de l	Number Street  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  At least one of the debtors and another	As of the date you file, the claim is: Check all that applications  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government			1
and the state of t	☐ Check if this claim is for a community debt  Is the claim subject to offset? ☐ No ☐ Yes	Claims for death or personal injury while you were intoxicated  Other. Specify			
2.2	Priority Creditor's Name  Number Street	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that approximately		\$	\$
the community was drawned by the state of th	City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt is the claim subject to offset?  No  Yes	☐ Contingent ☐ Unliquidated ☐ Disputed  Type of PRIORITY unsecured claim: ☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government of the claims for death or personal injury while you were introducated ☐ Other. Specify			

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P	rt 21 List All of Your NONPRIORITY Unsecured Claims		
3.	Do any creditors have nonpriority unsecured claims against you \(\sigma\) No. You have nothing to report in this part. Submit this form to the \(\sigma\) Yes		
4.	List all of your nonpriority unsecured claims in the alphabetical of nonpriority unsecured claim, list the creditor separately for each claim included in Part 1. If more than one creditor holds a particular claim, is claims fill out the Continuation Page of Part 2.	. For each claim listed, identify what type of claim it is. Do not	t list claims already
l.1	DODATOLO RECOLUERZY  Notificity Creditor's Name  120 CORDORAL BLVJ SLE /	Last 4 digits of account number 2 2 93  When was the debt incurred?	Total claim
	Number Street VA 23502 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Wide incurred the debt? Check one.  ☐ Debtor 1 only ☐ Debtor 2 only	Contingent Unliquidated Disputed	
	Debtor 1 and Debtor 2 only  At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt  Is the claim subject to offset? ☐ No ☐ Yes	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Other Specify	
.2	THEY PRIMEIR BANK Nonpriority Creditor's Name 3830 N LOVISC AND	Last 4 digits of account number When was the debt incurred?	s 1/52-00
	Number Street JAIIS SD 57/07 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only	Unliquidated Disputed	·
	Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?  No Yes	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Color Color Debts	
3	JETAOSOU CAPITA SYSTEMS Nonpriority Creditor's Name	Last 4 digits of account number $\frac{9}{4}$ $\frac{3}{4}$	<u>\$ 299.00</u>
	Le Mcleband Rd Number Street Cloud MN 56303	When was the debt incurred?  As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only	Contingent Unliquidated Disputed	
	Debtor 1 and Debtor 2 only  At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset? ☐ No ☐ Yes	<ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> <li>Other. Specify</li> </ul>	

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Case number (if known)

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Your NONPRIORITY Unsecured Claims — Continuation Page

A.F. U.S.		
After listing any entries on this page, number them beginning with 4	.4, followed by 4.5, and so forth.	Total claim
Friderit Asset Management	Last 4 digits of account number $\frac{2347}{2}$	, 50.00
Nonpriority Creditor's Name  53 Plumber (HR E Sile 4	When was the debt incurred? 3-1-2014	The state of the s
AFAMPA GA 30346	As of the date you file, the claim is: Check all that apply.	· Committee of the comm
City State ZIP Code  Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated ☐ Disputed	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
☐ Check if this claim is for a community debt  Is the claim subject to offset?	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify MATESTIC GASIND	Total Parling Value
☐ No ☐ Yes		
Day Coll Ada 121	1 D & Y U	924 20
Nonpriority Creditor's Name SLOW & SPRING MOUNTAIN	Last 4 digits of account number $\frac{D}{D} = \frac{9}{9} = \frac{9}{9}$ When was the debt incurred?	\$ 177,00
Number Street AV 89117	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent Unifiquidated	Para disensity of Para
Who incurred the debt? Check one.  Debtor 1 only	☐ Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:  Student loans	
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	THE AND
is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify (NUNBUSSIN)	
□ No □ Yes		The state of the s
_ CROWDER JAMIN CHIROPMENT CLC LENGTOS LANE 3. BUILDINGS ULP	Last 4 digits of account number 59 70	s 2150.00
1000 E 804h BLACE Ste 555 Novahn	When was the debt incurred? 7-1-2016	
Number Street  MERRIVINE THE Globe  City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
State ZIP Code  Wildo incurred the debt? Check one.	☐ Contingent ☐ Unliquidated ☐ Disputed	
Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	PP Wild man figure appear
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	to be a man and the state of th
☐ Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	mbos springer serve as
Is the claim subject to offset? ☐ No ☐ Yes	Other Specify CHIQO PRIOTIC BILL	Vertical designation of the second se
		· Chillenge es

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/Athi	que the	CEBOOTE CONTON	<b>/</b> Page 35	Ofs62mber (if known)			
First Name Middle Nam	Last Nan	ne s	U	,		······	~

Part 3:

List Others to Be Notified About a Debt That You Already Listed

example, if a collection agency is trying to collect from you 2, then list the collection agency here. Similarly, if you have	your bankruptcy, for a debt that you already listed in Parts 1 or 2. For u for a debt you owe to someone else, list the original creditor in Parts 1 or more than one creditor for any of the debts that you listed in Parts 1 or 2, list the ns to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
PID BOX 9500	Line of (Check one): D Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
WILKES BARRE PA 18773 City State ZIP Code	Last 4 digits of account number 3 2 C L
Malvest Recovery	On which entry in Part 1 or Part 2 did you list the original creditor?
2947 CLAYS+	Line of (Check one): D Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
SANT CHARLES NO 6330/	Last 4 digits of account number $8024$
CREDITONE BANK	On which entry in Part 1 or Part 2 did you list the original creditor?
PO BOX 98872	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Nulhber Street	Part 2: Creditors with Nonpriority Unsecured Claims
City LAS VEG 43 NV State ZIP Code	Last 4 digits of account number 1123
Columetrity water Dept	On which entry in Part 1 or Part 2 did you list the original creditor?
PO BOX 1519 /204 pulnshi Bl	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured Claims
CALUMET CITY TU COULDS	Last 4 digits of account number 10 1 0
CAPITAL ONE	On which entry in Part 1 or Part 2 did you list the original creditor?
DO BOX 85520	Line of (Check one): Q Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
City many UA 23285 City State ZIP Code	Last 4 digits of account number 1847
Pletfolio acovery	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street PARE ALUA	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Claims Part 2: Creditors with Nonpriority Unsecured
NORTOW VA 23500 ZIP Code	Last 4 digits of account number $9993$
4185 PREMER BANK	On which entry in Part 1 or Part 2 did you list the original creditor?
3520 N LOVISE AND	Line of (Check one): Deart 1: Creditors with Priority Unsecured Claims
	Part 2: Creditors with Nonpriority Unsecured Claims
SION TALLS SD 57/07 City State ZIP Code	Last 4 digits of account number

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Case number (if known)\_

Part 3:

List Others to Be Notified About a Debt That You Already Listed

2, then list the collection agency here. Similarly, if you have	t your bankruptcy, for a debt that you already listed in Parts 1 or 2. For ou for a debt you owe to someone else, list the original creditor in Parts 1 or //e more than one creditor for any of the debts that you listed in Parts 1 or 2, list the ons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Netherson Corporal Systems	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street Street	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
	Part 2: Creditors with Nonpriority Unsecured Claims
SHART CLOUD MN 57107 City State ZIP Code	Last 4 digits of account number $\frac{\mathcal{D}}{\mathcal{D}} \frac{\mathcal{D}}{\mathcal{D}} \frac{\mathcal{S}}{\mathcal{S}}$
TRUGALT ASSET MANAGEMENT	On which entry in Part 1 or Part 2 did you list the original creditor?
53 permeter CTR E SteY	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
X	Part 2: Creditors with Nonpriority Unsecured Claims
AHANGE GA 30346 City State ZIP Code	Last 4 digits of account number $9367$
AARhon Agency	On which entry in Part 1 or Part 2 did you list the original creditor?
8668 Spantimountarial	Line of (Check one): D Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
100 100	Claims
City State ZIP Code	Last 4 digits of account number 0 \$ 4 9
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
City State ZIP Code	Last 4 digits of account number
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
Namo	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Claims Part 2: Creditors with Nonpriority Unsecured
	Last 4 digits of account number
City State ZIP Code	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
	Part 2: Creditors with Nonpriority Unsecured Claims
×-	, , , , , , , , , , , , , , , , , , ,
City State ZIP Code	Last 4 digits of account number

Pärt 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claims from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. Other. Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.
- Total claims from Part 2
- 6f. Student loans
  - 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
  - 6h. Debts to pension or profit-sharing plans, and other similar debts
  - Other. Add all other nonpriority unsecured claims.
     Write that amount here.
  - 6j. Total. Add lines 6f through 6i.

Total claim

ia.	\$ <u>·</u>	0	
		4	

- 6b. s
- 6c. <sub>\$\_\_\_\_</sub>
- 6d. +s 5854.28
- 6e. \$ 5,854.28

Total claim

- er. \$ 4340.00
- 6g. \$\_\_\_\_\_
- 6h. s
- 6i. + s 11,799 28
- 6j. \$16,139,28

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		information to iden	ntify your c	ase:	FERRIEN	· ·				·	
	ebtor ebtor 2 Spouse If filing)	First Name	Midd Midd	le Name	Last Name	, , , , , , , , , , , , , , , , , , ,		•			
	•	Bankruptcy Court for	the: Norther	n District of II	linois						
	ase number if known)									Check if amende	
Ω	fficial I	Form 106Ġ									
		ule G: Ex		ry Cor	ntracts a	nd Un	expired L	.ease	<b>e</b> s		12/15
info	ormation. I	ete and accurate a If more space is n ges, write your na	eeded, cop	y the additio	nal page, fill it ou						ny
.1.	☐ No. C	nave aný executor Check this box and i Fill in all of the info	file this form	with the cou	rt with your other s					6A/B).	
2.		rately each perso , rent, vehicle leas d leases.									
-	Person o	or company with w	rhom you t	ave the cont	tract or lease		State what the co	ontract or	lease is for		
2.1	AA Name	zoal Sale:	531	ease.	N. 4		JUPNIH ACE+#	Re	lease		
***	Number Red	5 COBB Street JN ASAW	<b>\$</b> \$	906 f 301	<u>3lvd NW</u> 44		Acet#	- C1	4802	395	· · · · · · · · · · · · · · · · · · ·
2.2	City 1		State	ZIP Code	CONTRACTOR CONTRACTOR MATERIAL				CONTRACTOR NAMED OF		
	Name	· · · · · · · · · · · · · · · · · · ·	. ,								
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2.5	City	- The state of the	State	ZIP Code	ne der blief der 2000 eine Challe half und von en hand und	erenterialistikaisetta liikusta en	به الله الافتيان بين الكائن أن مستند معينا تكسير الوالا إلى بوسنا بم	Alini Washing and Alinessia	tak karan dan dinan dipendasian nagbangkan dibumun disebagai	Balan Anguaran ang Panggani, Inng Si	
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Debtor 1

	7.1		ocument
	CATANIQUE	Shellee	relguson
First Name	Middle Name	Last Name	<del></del>

Case number (if known)\_

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2.2	<u> </u>	•										
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Fill in this in	formation to identify	y your case:			
-Debtor 1	LATANIGU		FERGISON	400000000000000000000000000000000000000	
Debtor 2	First Name	Middle Name	Last		
(Spouse, if filing)	•	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	: Northern District of Illi	nois		
Case number (if known)	<u> </u>				
			······································		

### Official Form 106H

### Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

	7					
1.		ve any codebtors?	(If you are filing a joint case, do	not list either spouse a	is a codebtor.)	
	M No					
	Yes Within the	·	······································	······································	? (Community property states and territories include	
Z.			you lived in a community prop isiana, Nevada, New Mexico, Pu	-	* * * * * * * * * * * * * * * * * * * *	
	☐ No. Go					
	🛚 Yes. Di	id your spouse, form	ner spouse, or legal equivalent liv	e with you at the time?	?	
	□ No					
-	. Q Yes	s. In which communit	ty state or territory did you live?_		. Fill in the name and current address of that person.	
•						
	Nar	ene of your spouse, former a	spouse, or legal equivalent	<del></del>		
		<u>.</u>	,			
	Nun	mber Street	1			
	_	• <u></u> _			•	
	City	у	State	ZIP Code		
		D (Official Form 106 E/F, or Schedule G		m 106E/F), or Schedu	ule G (Official Form 106G). Use Schedule D,	
•	Schedule I Schedule I	•		m 106E/F), or Schedu	ule G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the d	lebt
	Schedule I Schedule I	E/F, or Schedule G		m 106E/F), or Schedu		lebt
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3.1	Schedule E Schedule E Column 1:  Name Number City  Name Number City  Name	E/F, or Schedule G : Your codebtor  Street	to fill out Column 2.  State	ZIP Code	Column 2: The creditor to whom you owe the dicease that apply:  Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line	iebt
3.1	Schedule E Schedule E Column 1:  Name Number City  Name Number	E/F, or Schedule G : Your codebtor  Street	to fill out Column 2.  State	Z!P Code	Column 2: The creditor to whom you owe the dischedules that apply:  Schedule D, line Schedule E/F, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule E/F, line	lebt

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Case number (# known)

Last Name

Last Name

		Additional Page to	List More Codebtors			
	Column	1: Your codebtor			Column 2: The creditor to whom yo	ou owe the debt
3		•			Check all schedules that apply:	
Н					Schedule D, line	
	Name	•		,	☐ Schedule E/F, line	,
	Number	Street			─ ☐ Schedule G, line	
	City		State	ZIP Code		<del> </del>
3				•	D Schedule D, line	
	Name ,				☐ Schedule E/F, line	
	Number	· Street	·		Schedule G, line	•
	Number	. Other		•		
	City		State	ZIP Coda		
3						
Н	Name				Schedule D, line	
				•	Schedule E/F, line	
	Number	Street			Schedule G, line	
	<b>6</b> 11		0	30.0-2-	<del></del>	
	City		State	ZIP Code		
3		·	·		Schedule D, line	
	Name				Schedule E/F, line	
	Number	Street		·	Schedule G, line	
	Hallings	Sueer		•	· ·	
	City		State	ZIP Code		· · · · · · · · · · · · · · · · · · ·
3			•			
	Name				Schedule D, line	: .
			·		Schedule E/F, line	
	Number	Street -			Schedule G, line	
	City		State	ZIP Code		
3.	·		Otate	ZIF COGE	***************************************	
	Name	•	· · · · · · · · · · · · · · · · · · ·		D Schedule D, line	
	Harris				☐ Schedule E/F, line	
	Number	Street ·			Schedule G, line	
				•		
	City		State	ZIP Code	····	<del> </del>
3					_ Schedule D, line	*
	Name	******			Schedule E/F, line	
	N				Schedule G, line	-
	Number	Street			Objective of the	
	City		State	ZIP Code	<del>-</del>	
3			·			
	Name	<del></del>			Schedule D, line	
				·	☐ Schedule E/F, line	•
	Number	Street			Schedule G, line	
			<u>.                                    </u>		_	
·····	City		State	ZIP Code		

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Bill in this in	formation to identify	your case:				÷	
Debtor 1 ·	LA HANIQUE	Shelle Middle Name	FERQUSON Last Name				
Debtor 2 (Spouse, if filing)	First Manna	Middje Name	Last Name				
		Northern District of Illinois		•			•
Case number	••••••	•		•	Check if	this is	•
(if known)			<del></del>			nended filing	•
						plement showing pos ne as of the following o	
Official Fo	orm 1061				MM /	DD / YYYY	
Sched	lule I: You	ır Income					12/15
supplying cor If you are sep separate shee	rect information. If your spou	essible. If two married pour are married and not in the second sec	filing jointly, and yo ı. do not include inf	our spou formatio	ise is living with In about your spo	you, include informatic ouse. If more space is r	on about your spouse. needed, attach a
Fill in your information	employment n.		Debtor 1			Debtor 2 or non-f	iling spouse
attach a se	more than one job, parate page with about additional	Employment status	☐ Æmployed ☑ Not employe	ed		☐ Employed ☐ Not employed	
Include par self-employ	t-time, seasonal, or yed work.		SCT		•		
Occupation	may include student ker, if it applies.	Occupation		·			-
		Employer's name					
		Employer's address	. Number Street			Number Street	
							<del></del> -
	•		pate, espera			·	
			City	State	ZIP Code	City	State ZIP Code
		How long employed th	ere?				
Part 2:	Give Details About	Monthly Income	•				
Estimate n		the date you file this fo	rm. If you have nothi	ing to rep	oort for any line, w	rite \$0 in the space. Inch	ıde your non-filing
If you or yo	ur non-filing spouse ha	ve more than one employ tach a separate sheet to		rmation	for all employers t	for that person on the line	es
. ,	•		•	· ·	For Debtor 1	For Debtor 2 or non-filing spouse	
2. List mont deductions	hly gross wages, salas). If not paid monthly,	rry, and commissions (t calculate what the month	pefore all payroll ly wage would be.	2.	\$ 13300	\$	The second secon
3. Estimate	and list monthly over	time pay.		3. +	\$	+ \$	
4. Calculate	gross income. Add lir	ne 2 + line 3.		4.	\$733.00	\$	-

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Case number (if Known)

Case number (if Known)

		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	\$ 133.00	· \$	
5. List all payroli deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$	\$	
5b. Mandatory contributions for retirement plans	5b.	\$ O	\$	•
5c. Voluntary contributions for retirement plans	5c.	\$ <u> </u>	· \$	
5d. Required repayments of retirement fund loans	5d.	<u>\$</u>		•
5e. Insurance	5e.	\$ <u>O</u>	\$	
5f. Domestic support obligations	5f.	\$	<u> </u>	
5g. Union dues	5g.	\$	\$	
5h. Other deductions. Specify:	5h. +	·\$	+ \$	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5l	ih. 6.	\$	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	s /33.00	\$	
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a,	\$	\$	
8b. Interest and dividends	8b.	\$	\$	
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive	dent	-		
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$	
8d. Unemployment compensation	8d.	\$	\$	
8e. Social Security	8e.	\$	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:		\$ 609.00	\$	
8g. Pension or retirement income	8g.	• ()	•	
8h. Other monthly income. Specify:	8h. +		-L. a	
		· · · · · · · · · · · · · · · · · · ·	1	
<ol> <li>Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.</li> </ol>	9.	\$ 1369.00	\$	-
10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	s 1,362.00	+ \$	= \$ [362,00
11. State all other regular contributions to the expenses that you list in Sche Include contributions from an unmarried partner, members of your household, friends or relatives.		endents, your roo	mmates, and other	
Do not include any amounts already included in lines 2-10 or amounts that are Specify:	e not availa	able to pay expen	ises listed in <i>Schedule J</i> . 11. <del>1</del>	+ \$ 1362.00
<ol> <li>Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S</li> </ol>				s 1 362 00 Combined
13. Do you expect an increase or decrease within the year after you file this No.	form?			monthly income
☐ Yes. Explain:				

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Fill in this information to identify	your case:		•	•
Debtor 1 LATANIQUE	Shelee Felgusa	Check if this	is:	
First Name Debtor 2	Middle Name Last Name			
(Spouse, if filing) First Name	- Middle Name Last Name	A supple	ment showing postp	
United States Bankruptcy Court for the: I	Northern District of Illinois	expense	s as of the following	date:
Case number (If known)		MM / DD	YYYY	
Official Form 106J				
Schedule J: You	ur Expenses			12/15
Be as complete and accurate as poinformation. If more space is neede (if known). Answer every question.	d, attach another sheet to this form	ing together, both are equally res n. On the top of any additional pa	sponsible for supplyi ages, write your name	ng correct e and case number
Part () Describe Your Hou	Senoia			
1. Is this a joint case?	•			
No. Go to line 2.  Yes, Does Debtor 2 live in a s	eparate household?		,	
☐ No ☐ Yes. Debtor 2 must file	e Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		, in which the Private
2. Do you have dependents?	□ No	Dependent's relationship to	Dependent's	Does dependent live
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age	with you?
Do not state the dependents' names.	·	Day Net	10	☑ No ☑ Yes
Hairies.	•	<u>50N</u>	· <u> </u>	☐ No ☑ Yes
		DAUGINER	14	□ <sub>A</sub> No
:		SON	-	Yes
1.		7074		☐ No ☐ Yes
		Hiece	5 Moints	□ №
		· NepHew	<u> </u>	Yes
3. Do your expenses include expenses of people other than yourself and your dependents?	☐ No ☐ Yes			- 46
	ng Monthly Expenses		-	
Estimate your expenses as of your		are using this form as a supplem	ent in a Chapter 13 c	ase to report
expenses as of a date after the ban	kruptcy is filed. If this is a supplement	ental Schedule J, check the box	at the top of the form	and fill in the
applicable date. Include expenses paid for with non	-cash government assistance if you	r know the value of		
such assistance and have included	•		Your exper	nses
The rental or home ownership e any rent for the ground or lot.	xpenses for your residence. include	e first mortgage payments and	4. s 150	.00
If not included in line 4:	•		g	4
4a. Real estate taxes			4a. \$	<u> </u>
4b. Property, homeowner's, or re	enter's insurance		4b. \$	<del>/</del>
4c. Home maintenance, repair, a	and upkeep expenses	•	4c. \$	<del>)                                    </del>
4d. Homeowner's association or	condominium dues	announce of the company of the compa	4d. \$	-

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Debtor 1

Case number (# known),

12. Transportation. Include gas, maintenance, bus or train fare.  Do not include car payments.  13. Entertainment, clubs, recreation, newspapers, magazines, and books  14. Charitable contributions and religious donations  15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	
8. Utilities:  sa. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify:  7. Food and housekeeping supplies 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance 16. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 1	
6a. Electricity, heat, natural gas         6a. \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
8a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
6c. Valety, sewer, galaxye cure-cutors 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. \$ 0.00  11. \$ 0.00  12. Transportation. Include gas, maintenance, bus or train fare. 12. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. 16. Insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance deducted from your pay or included in lines 4 or 20. 15b. Health insurance 15c. Vehicle insurance 15c. \$ 0.00  15d. Other insurance. Specify: 15d. Other insurance specify: 15d. Other insurance for vehicle 1 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Speci	
sed. Other. Specify:  7. Food and housekeeping supplies  8. Childcare and children's education costs  9. Clothing, laundry, and dry cleaning  10. Personal care products and services  11. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify. 15d. \$  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify. 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify. 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other, Specify: 17c. Other, Specif	
8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. \$	
8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. \$ 25 \ 00  11. Medical and dental expenses 11. \$ 0  12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 125 \ 0  13. \$ 125 \ 0  14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other, Specify: 17d. Other, Specify: 17e. Cother, Specify: 17e. Other, Specify: 17e. Cother, Sp	
9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. Medical and dental expenses 11. \$ \times \tim	
11. Medical and dental expenses 11. Medical and dental expenses 11. S	
11. Installment or lease payments:  12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.  12. Use the trainment, clubs, recreation, newspapers, magazines, and books  13. \$ 40.0  14. \$ 0  15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify.  15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other, Specify: 17. Installment or Specify: 17. Installment or Vehicle 2 17c. Other, Specify: 18. \$ 0  19. \$ 0  10. \$ 0  11. \$ 0  12. \$ 0  12. \$ 0  13. \$ 40.0  14. \$ 0  15. \$ 0  15. \$ 0  16. \$ 0  17a. \$ 0  17b. Car payments for Vehicle 2  17c. Other, Specify: 17c. \$ 0  17d. \$	
Do not include car payments.  12.	- <del></del>
13. Entertainment, clubs, recreation, newspapers, magazines, and books  14. Charitable contributions and religious donations  15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  15d. S  15d.	,
13. Entertainment, clubs, recreation, newspapers, magazines, and books  14. Charitable contributions and religious donations  15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  15d. SOOO  15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Car payments for Vehicle 2  17c. Other. Specify:  17d. SOO  17d.	)
15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Specify:  1	<del></del>
Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Specify: 15d. Specify: 16. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other, Specify: 17d. Specif	
15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other, Specify: 17d. Specify: 17d. Car payments for Vehicle 2 17d. Other, Specify: 17d. Spe	
15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. \$  15d. \$  15d. \$  15d. \$  16. \$  17d. Specify: 17d. Car payments for Vehicle 1 17d. Car payments for Vehicle 2 17d. Other, Specify: 17d. Other, Specify: 17d. Other, Specify: 17d. Specif	
15d. Vehicle insurance. Specify:  15d. S  15d. \$  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other, Specify:  17d. S	
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other, Specify:  17c. \$	
Specify:	
Specify:	
17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other, Specify:  17c. \$	
17a. Car payments for Vehicle 1       17a. \$	
17b. Car payments for Vehicle 2  17c. Other, Specify: 17c. \$	
17c. Other, Specify: 17c. \$ 0	·
rrd. Other, opening.	
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106l).	
19. Other payments you make to support others who do not live with you.	
Specify:	<del></del>
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a. Mortgages on other property	<del></del>
20b. Real estate taxes	
20c. Property, homeowner's, or renter's insurance	<del> </del>
20d. Maintenance, repair, and upkeep expenses	
20e. Homeowner's association or condominium dues 20e. \$	

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Other. Specify: Calculate your monthly expenses. 22a. 22a, Add lines 4 through 21. 22b.-Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. 23. Calculate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above. 23b. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? ☐ No. ☐ Yes. Explain here:

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Debtor 1 Debtor 2 (Spouse, if filing)  United States Bankruptcy Court for the: Case number (If known)  Official Form 106J-2  Schedule J-2: E	Shekee FELquso.  Middle Name Last Name  Middle Name Last Name	Check if this ☐ An amen ☐ A supplet expenses  MM / DD /	ded filing ment showing post as of the following YYYY	
Debtor 2 have one or more depend only with respect to expenses for l	ate household expenses ONLY IF De lents in common, list the dependents Debtor 2 that are not reported on Sci is form. On the top of any additional	s on both Schedule J and this for hedule J. Be as complete and ac	rm. Answer the que curate as possible.	estions on this form If more space is
1. Do you and Debtor 1 maintain se	parate households?	•		
No. Do not complete this for Yes				
2. Do you have dependents?	□ No	Dependent's relationship to	Dependent's	Does dependent live
Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.	Yes. Fill out this information for each dependent	Debtor 2:	age	with you?
Do not state the dependents' names.		• •		☐ No ☐ Yes
	. *		<del></del>	☐ No ☐ Yes ☐ No
		**************************************		☐ Yes
		**	B-B-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0	☐ No ☐ Yes
<ol> <li>Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?</li> </ol>	□ No □ Yes			· · · · · · · · · · · · · · · · · · ·
expenses as of a date after the ban Include expenses paid for with non	bankruptcy filing date unless you a kruptcy is filed. -cash government assistance if you	know the value of	e Service (1999)	r filosofie
	it on Schedule I: Your Income (Office xpenses for your residence, include		Your expe	11363
any rent for the ground or lot.	·		4. \$	THE TAX TO SEE THE TA
If not included in line 4:			<b>.</b>	
4a. Real estate taxes	ada da famina a-		4a. \$	-
4b. Property, homeowner's, or re			4b. \$	
4c. Home maintenance, repair, a			4c. \$	

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Debtor 1

Atanique Shelee Felguson

Last Name

Case number (# known)\_

:		•	Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$
		•	
5.	Utilities:	Ço.	· .
	6a. Electricity, heat, natural gas	6a.	\$
:	6b. Water, sewer, garbage collection	6b.	\$
i .	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
	6d. Other. Specify:	6d.	\$ <u>·</u>
7.	Food and housekeeping supplies	7.	\$
, 8.	Childcare and children's education costs	8.	<b>\$</b>
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$ <u></u>
.11,	Medical and dental expenses	11,	\$
12.	Transportation. Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	
15.	insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
			,
16,	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$
17.	installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17ь. Car payments for Vehicle 2	17b.	\$
٠	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$ <u>·</u>
18.	Your payments of alimony, maintenance, and support that you did not report as dedu your pay on line 5, Schedule I, Your Income (Official Form 106I).	cted from 18.	\$
19.	Other payments you make to support others who do not live with you.		· ·
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule	: Your Income.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	· 20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

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Debtor 1	First Name Middle Name Last Name Case r	number (#known)			-
21. Other. S	Specify:	2	1. +\$	en e	
The resu	onthly expenses. Add lines 5 through 21.  It is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to call enses for Debtor 1 and Debtor 2.	culate the 22	<b>\$</b>		
23. Line not u	sed on this form.				
4 Do you av	rough an ingresses or decrease to account to				
For examp	spect an increase or decrease in your expenses within the year after you file this ble, do you expect to finish paying for your car loan within the year or do you expect you payment to increase or decrease because of a modification to the terms of your mortga	ır	,		
☐ No. ☐ Yes.	Explain here:				
en e	·				

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Fill in this information to identify your ca	Se:	•	·
Debtor 1 First Name AtaNique S	helse Felguson  Name Lastvalme		
Debtor 2 (Spouse, if filing) First Name Middle	Name Last Name	•	
United States Bankruptcy Court for the: Northern	n District of Illinois		
Case number (If known)			☐ Check if this is an amended filing

### Official Form 106Dec

# **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an att	torney to help you fill out bankruptcy forms?
☑ No	S W D W No. 10 Daylor firm and
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the s that they are true and correct.	ummary and schedules filed with this declaration and
* Lubry Legyan *	Signature of Debtor 2
Date 5 24 2018.	Date MM/ DD / YYYY

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Eill in this in	formation to identify y	/our case:	Constitution of the second of	
Debtor 1	LATANIQUE First Name	Shelee Middle Name	FELGUSON	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the: 1	Northern District of	Illinois <sup>*</sup>	
Case number (If known)	***************************************			

### Official Form 107

## Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Give Details Abou	t Your Marital Stat	us and	Where Yo	u Lived Before	•		
1. What is	your current marital	status?	,					
· □ Mar ☑ Not	nied married							. •
.□/No	•	you lived anywhere					,	•
De L	ebtor 1:		Dates lived	Debtor 1 there	Debtor 2:	•		Dates Debtor 2
N	LOTHE Street	VAN	From To	12-1-08	Same as Debtor 1  Number Street			Same as Debtor 1  From To
	ity	State ZIP Code	- ·		City	State ZIP Co	de	
	· · · · · · · · · · · · · · · · · · ·				☐ Same as Debtor 1			Same as Debtor 1
N	lumber Street		From To		Number Street			From
	City	State ZIP Code	-		City	State ZIP	Code	
states a ☐ No	and territories include i	you ever live with a sp Arizona, California, Idal t Schedule H: Your Co	ho, Louis	iana, Nevad	valent in a community pro ia, New Mexico, Puerto Ric n 106H).	operty state or te co, Texas, Washin	eritory? (C agton, and \	ommunity property Misconsin.)

Part 21 Explain the Sources of Your Income

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Debtor 1

	L	Document
LATANIQUE	The 1SE	FERGUSON
LATINOVICE	NELLE _	1ecoposav

Case number (if known)\_

I in the total amount of income you received you are filing a joint case and you have inco	me that you receive toget			
(			·	•
No Yes. Fill in the details.	·	•		•
res. Fill in the details.			Debtor 2	
	Debtor 1		Deptor 2	
•	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$	Wages, commissions, bonuses, tips Operating a business	\$
For last calendar year:	Wages, commissions, bonuses, tips	\$	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$
(January 1 to December 31,	Operating a business		Operating a business	
For the calendar year before that:	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
(January 1 to December 31,	Operating a business		Operating a business	
clude income regardless of whether that inc nemployment, and other public benefit paym ambling and lottery winnings. If you are filing at each source and the gross income from a	come is taxable. Examples nents; pensions; rental inc g a joint case and you hav	s of other income are all come; interest; dividends se income that you receive	ved together, list it only once	icils, loyallies, and
id you receive any other income during to clude income regardless of whether that income properties and other public benefit paymambling and lottery winnings. If you are filing steach source and the gross income from the No.  No.  Yes. Fill in the details.	come is taxable. Examples nents; pensions; rental inc g a joint case and you hav	s of other income are all come; interest; dividends se income that you receive	ved together, list it only once	icils, loyallies, and
clude income regardless of whether that inc nemployment, and other public benefit paym ambling and lottery winnings. If you are filing st each source and the gross income from a No	come is taxable. Examples nents; pensions; rental incogo g a joint case and you hav each source separately. D	s of other income are all come; interest; dividends se income that you receive	money collected from laws ved together, list it only once at you listed in line 4.	icils, loyallies, and
clude income regardless of whether that income memployment, and other public benefit paymambling and lottery winnings. If you are filing at each source and the gross income from a No Yes. Fill in the details.	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. Debtor:1	s of other income are all orne; interest; dividends to income that you received not include income that the company of the com	money collected from laws ved together, list it only once at you listed in line 4.  **Debtor 2**  Sources of income	Gross income from each source (before deductions and
clude income regardless of whether that inc nemployment, and other public benefit paym ambling and lottery winnings. If you are filing at each source and the gross income from a	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. Debtor:1	Gross income from each source (before deductions and exclusions)	money collected from laws ved together, list it only once at you listed in line 4.  **Debtor 2**  Sources of income	Gross income from each source (before deductions and
clude income regardless of whether that income remployment, and other public benefit paymambling and lottery winnings. If you are filing at each source and the gross income from a No Yes. Fill in the details.  From January 1 of current year until	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. Debtor:1	Gross income from each source (before deductions and exclusions)	money collected from laws ved together, list it only once at you listed in line 4.  **Debtor 2**  Sources of income	Gross income from each source (before deductions and
clude income regardless of whether that income memployment, and other public benefit paymambling and lottery winnings. If you are filing at each source and the gross income from a No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. Debtor:1	Gross income from each source (before deductions and exclusions)	money collected from laws ved together, list it only once at you listed in line 4.  **Debtor 2**  Sources of income	Gross income from each source (before deductions and
clude income regardless of whether that inchemployment, and other public benefit paymambling and lottery winnings. If you are filing at each source and the gross income from a No Yes. Fill in the details.  From January 1 of current year until	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. Debtor:11	Gross income from each source (before deductions and exclusions)  \$ 133.00	money collected from laws ved together, list it only once at you listed in line 4.  **Debtor 2**  Sources of income	Gross income from each source (before deductions and
clude income regardless of whether that inchemployment, and other public benefit paymambling and lottery winnings. If you are filing at each source and the gross income from a No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:	come is taxable. Examples thents; pensions; rental income a joint case and you have each source separately. Debtor:1  Sources of income Describe below.  SST	Gross income from each source (before deductions and exclusions)  \$ 790.00	money collected from laws ved together, list it only once at you listed in line 4.  **Debtor 2**  Sources of income	Gross income from each source (before deductions and
clude income regardless of whether that income memployment, and other public benefit paymambling and lottery winnings. If you are filling at each source and the gross income from a No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:  (January 1 to December 31, 27)	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. Debtor:11	Gross income from each source (before deductions and exclusions)  \$ 133.00	money collected from laws ved together, list it only once at you listed in line 4.  **Debtor 2**  Sources of income	Gross income from each source (before deductions and
clude income regardless of whether that inchemployment, and other public benefit paymambling and lottery winnings. If you are filing at each source and the gross income from a No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:  (January 1 to December 31, 2017)	come is taxable. Examples thents; pensions; rental income a joint case and you have each source separately. Debtor:1  Sources of income Describe below.  SST	Gross income from each source (before deductions and exclusions)  \$ 790.00	money collected from laws ved together, list it only once at you listed in line 4.  **Debtor 2**  Sources of income	Gross income from each source (before deductions and

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ither C	Debtor 1's or Debtor 2's debts primarily o	consumer debi	s?		
"in	either Debtor 1 nor Debtor 2 has primarily curred by an individual primarily for a perso uring the 90 days before you filed for bankru	nal, family, or h	ousehold purpose."	•	(8) as
	No. Go to line 7.			•	
۵	Yes. List below each creditor to whom you total amount you paid that creditor. E child support and alimony. Also, do r	o not include p not include payn	ayments for domestic su nents to an attorney for t	ipport obligations, such as this bankruptcy case.	
* S	Subject to adjustment on 4/01/19 and every	3 years after th	at for cases filed on or a	fter the date of adjustment.	
es. De	ebtor 1 or Debtor 2 or both have primarily	/ consumer de	bts.		
Du	uring the 90 days before you filed for bankn	ıptcy, did you p	ay any creditor a total of	\$600 or more?	
	No. Go to line 7.				
	Yes. List below each creditor to whom you creditor. Do not include payments fo alimony. Also, do not include payme	r domestic supr	ort obligations, such as	child support and	
		Dates of payment	Total amount paid	Amount you still owe	Was this payment fo
	•		\$	\$	☐ Mortgage
	Creditor's Name				Car
	Number Street			÷	Credit card
		•			Loan repayment
					Suppliers or vend Other
	City State ZIP Code				
			\$	<u> </u>	☐ Mortgage
	Creditor's Name			•	☐ Car
•	Number Street			•	☐ Credit card
	Number Street				Loan repayment
					Suppliers or vend
		•			Other
	City State ZIP Code	•			
	City State ZIP Code	` .			
	City State ZIP Code		· .	•	<b>D</b>
,	City State ZIP Code  Creditor's Name		\$	\$	☐ Mortgage
			\$	\$	☐ Car
			\$	\$	Car Credit card
	Creditor's Name		\$	<b>\$</b>	Car Credit card Loan repayment
	Creditor's Name		\$	\$	Car

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	LATANIQUE	Sheree	FERMEON
First Name	Middle Name	i ast Name	0 -

_		
Case number (if known)_	 	 

No Dates of payment paid Amount you still Reason for this payment    Dates of payment   D	perpendicular of training you are an entrement, another, pers		rowner of 20% or r	artnerships of whic nore of their voting	securities: and any managing
Amount you still Reason for this payment paid owe still Reason for this payment should be payment and the still reason for this payment payment should be payment payment paid owe include creditor's name.    Dates of payment payment paid owe include creditor's name	agent, including one for a dusiness you operate as a s	ole proprietor.	11 U.S.C. § 101. In	clude payments fo	r domestic support obligations,
Pes. List all payments to an insider.    Dates of payment   Total amount pour still   Reason for this payment	such as child support and alimony.	• •			
Pes. List all payments to an insider.    Dates of payment   Total amount pour still   Reason for this payment	7 No.			•	
Dates of payment Amount you still Reason for this payment owe Steed    Number Steed   Sale ZIP Code   Sale ZIP	·		•		
Payment   Paid   Owe	a res. List all payments to an insider.		9 19	4	
Insider's Name    Number   Street   Suste   ZiP Code				-	Reason for this payment
Number Street    Sate ZIP Code   State ZIP Code	•		•	•	
Number Street    Sate ZIP Code   State ZIP Code			\$	\$	
City State ZIP Code    S	Insider's Name				
City State ZiP Code  S					
Same	Number Street				
Same					
Same	,				
Same					
Insider's Name  Number Street  City State ZiPCode  Same  S	City State ZIP Code		<del></del>		
Insider's Name  Number Street  City State ZIP Code  Dates of payment paid Amount you still own many payment on account of a debt that benefited insider.  Dates of payment paid Amount you still own many payment insiders Name  City State ZIP Code  S \$			¢	œ.	
City State ZIP Code  thin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited insider?  tude payments on debts guaranteed or cosigned by an insider.  No  Yes. List all payments that benefited an insider.  Dates of Total amount Amount you still Reason for this payment notude creditor's name    Number Street   S   S	Insider's Name	***************************************	Φ	. ·	
city State ZIP Code  thin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited insider?  tude payments on debts guaranteed or cosigned by an insider.  No  Yes. List all payments that benefited an insider.  Dates of Total amount paid Amount you still Reason for this payment nowe Include creditor's name  Number Street  City State ZIP Code  \$	Human A Limite				
thin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited insider?  Itude payments on debts guaranteed or cosigned by an insider.  No Yes. List all payments that benefited an insider.  Dates of payment paid Amount you still Reason for this payment nowe Include creditor's name  Number Street  City State ZIP Code  \$	Number Street				,
thin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited insider?  lude payments on debts guaranteed or cosigned by an insider.  No  Yes. List all payments that benefited an insider.  Dates of Total amount Amount you still Reason for this payment paid owe include creditor's name    Number Street	·		٠.		
thin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited insider?  It insiders Name    No		<del></del>			,
thin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited insider?  Insiders Name    Dates of   Total amount   Amount you still   Reason for this payment   Include creditor's name					•
Insider?  Itude payments on debts guaranteed or cosigned by an insider.  No  Yes. List all payments that benefited an insider.  Dates of payment paid Amount you still own include creditor's name    Pates of payment paid   Pates of payment	City State ZIP Code				
Yes. List all payments that benefited an insider.    Dates of payment paid   Amount you still owe   Include creditor's name					
Dates of payment paid owe Include creditor's name  \$ \$ \$  Number Street  City State ZIP Code  \$ \$ \$ \$  Insider's Name		an insider.			
Insider's Name    payment paid owe   Include creditor's name	l No	an insider.			
Insider's Name  \$ \$ \$  Number Street  City State ZIP Code  \$ \$ \$  Insider's Name	No	an insider.			
Number Street  City State ZIP Code  \$	No	Dates of			
Number Street  City State ZIP Code  \$	No	Dates of			
City State ZIP Code  \$ Insider's Name	No	Dates of			
City State ZIP Code  \$ Insider's Name	No Yes. List all payments that benefited an insider.	Dates of			
City State ZIP Code  \$ Insider's Name	No Yes. List all payments that benefited an insider.	Dates of			
City State ZIP Code  \$ Insider's Name	No Yes. List all payments that benefited an insider.  Insider's Name	Dates of			
City State ZIP Code  \$ Insider's Name	No Yes. List all payments that benefited an insider.  Insider's Name	Dates of			
\$\$Insider's Name	No Yes. List all payments that benefited an insider.  Insiders Name  Number Street	Dates of			
	No Yes. List all payments that benefited an insider.  Insider's Name  Number Street	Dates of			
	No Yes. List all payments that benefited an insider.  Insider's Name  Number Street	Dates of			
	No Yes. List all payments that benefited an insider.  Insider's Name  Number Street	Dates of			
Number Street	No Yes. List all payments that benefited an insider.  Insider's Name  Number Street	Dates of			
Number Street	No Yes. List all payments that benefited an insider.  Insider's Name  Number Street  City State ZIP Code	Dates of			
	No Yes. List all payments that benefited an insider.  Insider's Name  Number Street  City State ZIP Code	Dates of			
	No Yes. List all payments that benefited an insider.  Insider's Name  City State ZIP Code	Dates of			
	No Yes. List all payments that benefited an insider.  Insider's Name  City State ZIP Code	Dates of			

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Debtor 1

Atamique Sheler Reguson

9. Wit	hin 1 year before you filed for bankrupt all such matters, including personal injury	cy, were you a party in any la	wsult, court action, or admin vorces, collection suits, patern	istrative proceed ity actions, suppo	ding? ort or custody modification
	contract disputes.	· cascs, oritin danno actions, a.	and the second second parameters	и, шин, порра	,
		•	•		
	Yes. Fill in the details.			·	
· · · · ·	res. I am mile demas.	Nature of the case	Court or agency	3	Status of the case
		·			·
	Case title		Court Name		— Pending
					On appeal
			Number Street	•	Concluded
	Case number:				
•			City State	ZIP Code	-
-					
	Case title		Court Name		— Pending
		-	Charle FACEFAC		On appeal
			Number Street		Concluded
			, totalises on the		
	Case number		City State	ZIP Code	
				_,	
	ck all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.			Date	Value of the property
	No. Go to line 11.	Describe the propert	y	Date	Value of the property
	No. Go to line 11. Yes. Fill in the information below.		y	Date	Value of the property
	No. Go to line 11.		у	Date	Value of the property .
	No. Go to line 11. Yes. Fill in the information below.  Creditor's Name	Describe the propert		Date	Value of the property
	No. Go to line 11. Yes. Fill in the information below.	Describe the propert	ied	Date	Value of the property
	No. Go to line 11. Yes. Fill in the information below.  Creditor's Name	Describe the propert  Explain what happen  Property was re	ed epossessed.	Date	Value of the property
	No. Go to line 11. Yes. Fill in the information below.  Creditor's Name	Explain what happen  Property was re	ed epossessed preclosed.	Date	Value of the property
	No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street	Explain what happen  Property was re Property was fo	epossessed. preclosed. arnished.	Date	Value of the property
	No. Go to line 11. Yes. Fill in the information below.  Creditor's Name	Explain what happen Property was re Property was for Property was gode Property was a	ed epossessed. oreclosed. amished. ttached, seized, or levied.		\$
	No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street	Explain what happen  Property was re Property was fo	ed epossessed. oreclosed. amished. ttached, seized, or levied.	Date	Value of the property  \$  Value of the property
	No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street	Explain what happen Property was re Property was for Property was gode Property was a	ed epossessed. oreclosed. amished. ttached, seized, or levied.		\$
	No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street	Explain what happen Property was re Property was for Property was gode Property was a	ed epossessed. oreclosed. amished. ttached, seized, or levied.		\$
	No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street	Explain what happen Property was re Property was for Property was gode Property was a	ed epossessed. oreclosed. amished. ttached, seized, or levied.		\$
	No. Go to line 11. Yes. Fill in the information below.  Creditor's Name  Number Street  City State ZiP Co	Explain what happen Property was re Property was for Property was gode Property was a	ed epossessed. oreclosed. amished. ttached, seized, or levied.		\$
	No. Go to line 11. Yes. Fill in the information below.  Creditor's Name  Number Street  City State ZiP Co	Explain what happen Property was re Property was for Property was gode Property was a	epossessed. preclosed. arnished. ttached, seized, or levied.		\$
	No. Go to line 11. Yes. Fill in the information below.  Creditor's Name  Number Street  City State ZIP Co	Explain what happen Property was round Property was gode Property was a Describe the property Explain what happen	epossessed. preclosed. arnished. ttached, seized, or levied.		\$
a :	No. Go to line 11. Yes. Fill in the information below.  Creditor's Name  Number Street  City State ZIP Co	Explain what happen Property was re Property was gode Property was a Describe the property Explain what happen	epossessed. preclosed. arnished. ttached, seized, or levied. y  ed		\$
	No. Go to line 11. Yes. Fill in the information below.  Creditor's Name  Number Street  City State ZIP Co	Explain what happen Property was re Property was gode Property was a Describe the property  Explain what happen Property was re Property was re	epossessed. preclosed. ttached, seized, or levied.  y  ed epossessed. preclosed.		\$
	No. Go to line 11. Yes. Fill in the information below.  Creditor's Name  Number Street  City State ZIP Co	Explain what happen Property was re Property was a Property was a Property was a Describe the property Explain what happen Property was re Property was re Property was re Property was ge	epossessed. preclosed. ttached, seized, or levied.  y  ed epossessed. preclosed.		\$

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Debtor 1

CA	+ANIQUE	Shelee	FERGUSON	)
First Name	Miridio home	Last Name	<u> </u>	•

Case number (# known)

·	ause you owed a debt?		
No ·			
Yes. Fill in the details.			* * * * * * * * * * * * * * * * * * *
*	Describe the action the creditor took	Date action was taken	Amount
Creditor's Name			
			e
Number Street			Ψ
,			
City State ZIP Code	Last 4 digits of account number: XXXX		
editors, a court-appointed recelver, a cus No	cy, was any of your property in the possession of an assign stodian, or another official?	ee for the bene	fit of
Yes			•
		•	
List Certain Gifts and Contribu	tions		
Gifts with a total value of more than \$600	Describe the gifts	Dates you gave	Value
per person		the gifts	
Person to Whom You Gave the Gift			\$
Leader of Advantage and Care			
		•	\$
	1		
Number Street			. •
Number Street  City State ZIP Code			
City State ZIP Code			
City State ZIP Code	Describe the gifts	Dates you gave the gifts	Value
City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600	Describe the gifts	Dates you gave the gifts	Value
City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600	Describe the gifts	Dates you gave the gifts	Value
City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value \$
City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value \$ \$
City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value \$\$
City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value \$\$
City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street	Describe the gifts	Dates you gave the gifts	Value \$ \$
City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift	Describe the gifts	Dates you gave the gifts	Value \$\$

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•			
LATANIQUE	Shelee 1	FRGUSON	Case number (# known)

No	·	·	
Yes. Fill in the details for each gift or o	ontribution.	•	
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
•			e
Charity's Name	<del>-</del>		Ψ
·	·		•
	* ,		¥sooren
Number Street			
Name Steet			
City State ZIP Code	meture .		
	The process of the state of the		
- 		•	
61 List Certain Losses			
AGSA			
thin 1 year before you filed for bankruster, or gambling?	uptcy or since you filed for bankruptcy, did you lose anyth	ing because of theft	, fire, other
	·		
No .	•		
Yes. Fill in the details.			
m			
Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss  Include the amount that insurance has paid. List pending insural	Date of your loss ace	Value of property lost
	Describe any insurance coverage for the loss  Include the amount that insurance has paid. List pending insural claims on line 33 of Schedule A/B; Property.	inss	
	Include the amount that insurance has paid. List pending insural	inss	
	Include the amount that insurance has paid. List pending insural	inss	
how the loss occurred	Include the amount that insurance has paid. List pending insural	inss	
how the loss occurred	Include the amount that insurance has paid, List pending insural claims on line 33 of <i>Schedule A/B</i> ; <i>Property</i> .	inss	
how the loss occurred  7. List Certain Payments or Tra	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B. Property.  ansfers	ice loss	\$
how the loss occurred  List Certain Payments or Tra thin 1 year before you filed for bankru u consulted about seeking bankrupto	Include the amount that insurance has paid, List pending insural claims on line 33 of <i>Schedule A/B</i> ; <i>Property</i> .	transfer any propert	\$
how the loss occurred  List Certain Payments or Tra thin 1 year before you filed for bankru u consulted about seeking bankrupto dude any attorneys, bankruptcy petition	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B. Property.  ansfers  uptcy, did you or anyone else acting on your behalf pay or by or preparing a bankruptcy petition?	transfer any propert	\$
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	LATANIQUE ShELE	e felguson	Case number (# known)
st Name	Middle Name Last Name	U	

		Description and value of any property to	ansferred	Date payment or transfer was made	Amount of payment
	-				
	Person Who Was Paid		•		\$
	No. 1 Charles				
	Number Street				\$
					7
	City State ZIP Code				
	Email or website address				
	Person Who Made the Payment, if Not You			_	=
/ N	not include any payment or transfer that yo No Yes. Fill in the details.	ou listed on line 16.	•		· , ·
		Description and value of any property to	ransferred	Date payment or	Amount of payr
				transfer was	
	Person Who Was Paid			Made	1
	COSCII VIIIC VIIIC COSC				•
	Number Street			l	<b>\$</b>
		į .			*
				h	\$
ith	City State ZIP Code	tcy, did you sell, trade, or otherwise to	transfer any property	to anyone, other tha	\$
in: Jic	City State ZIP Code	ousiness or financial affairs?  nade as security (such as the granting of the already listed on this statement.	f a security interest or	mortgage on your pro	perty).
in:	City State ZIP Code  nin 2 years before you filed for bankrup sferred in the ordinary course of your l ude both outright transfers and transfers m ot include gifts and transfers that you hav	ousiness or financial affairs? nade as security (such as the granting o	f a security interest or	mortgage on your pro	perty).
n: iu	City State ZIP Code  nin 2 years before you filed for bankrup sferred in the ordinary course of your l ude both outright transfers and transfers m ot include gifts and transfers that you hav	pusiness or financial affairs?  nade as security (such as the granting of the property)  re already listed on this statement.  Description and value of property	f a security interest or  Describe any propert	mortgage on your pro	perty). Date transfe
n: iu /	City State ZIP Code  nin 2 years before you filed for bankrup sferred in the ordinary course of your i ude both outright transfers and transfers in ot include gifts and transfers that you hav No Yes, Fill in the details.	pusiness or financial affairs?  nade as security (such as the granting of the property)  re already listed on this statement.  Description and value of property	f a security interest or  Describe any propert	mortgage on your pro	perfy). Date transf
1: 1: 1:	City State ZIP Code  nin 2 years before you filed for bankrup sferred in the ordinary course of your i ude both outright transfers and transfers in ot include gifts and transfers that you hav No Yes, Fill in the details.	pusiness or financial affairs?  nade as security (such as the granting of the property)  re already listed on this statement.  Description and value of property	f a security interest or  Describe any propert	mortgage on your pro	perfy). Date transf
n: iu A	City State ZIP Code  Ain 2 years before you filed for bankrup sferred in the ordinary course of your i ude both outright transfers and transfers in tot include gifts and transfers that you have No Yes. Fill in the details.  Person Who Received Transfer	pusiness or financial affairs?  nade as security (such as the granting of the property)  re already listed on this statement.  Description and value of property	f a security interest or  Describe any propert	mortgage on your pro	perty). Date transfe
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n: iu /	City State ZIP Code  Ain 2 years before you filed for bankrup sferred in the ordinary course of your I ude both outright transfers and transfers in not include gifts and transfers that you have No Yes, Fill in the details.  Person Who Received Transfer  City State ZIP Code  Person's relationship to you  Person Who Received Transfer	pusiness or financial affairs?  nade as security (such as the granting of the property)  re already listed on this statement.  Description and value of property	f a security interest or  Describe any propert	mortgage on your pro	perty). Date transfe

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Desc Main

Debtor 1

LATANIQUE Shelle Felguson

Midde Name Last Name

			•		•
9. With	in 10 years before you filed for bankru	ptcy, did you transfer any proper	ty to a self-settled trust	or similar device of w	hich you .
are	a beneficiary? (These are often called as	sset-protection devices.)			
Z N	No.				
	Yes. Fill in the details.				
<u></u>	i es. i ili ili ilie uctalis.	· · · · · · · · · · · · · · · · · · ·		and the state of t	3 4.00
	•	Description and value of the prope	rty transferred		Date transfer
					was made
	Name of trust				
	· · · · · · · · · · · · · · · · · · ·				
		-			
	List Certain Financial Account	· Instruments Safe Denosit	Boxes, and Storage	Units	
irt 8:	<u> </u>				
With	nin 1 year before you filed for bankrupt	cy, were any financial accounts o	or instruments held in y	our name, or for your l	oenefit,
clos	sed, sold, moved, or transferred?				
Inch	uge checking, savings, money market,	or other financial accounts; cert	ficates of deposit; shar	res in banks, credit uni	ons,
hrol	kerage houses, pension funds, cooper	atives, associations, and other fit	nancial institutions.		
	•		••		
		,			
<b>L</b>	Yes. Fill in the details.				
	•	Last 4 digits of account number	Type of account or	Date account was	Last balance befo
			instrument	closed, sold, moved, or transferred	closing or transfe
		• • · · ·		O, Danielou, ea	*
	Name of Financial Institution	• •	<b>~</b>		
		xxxx	Checking		5
	Number Street		☐ Savings		
	Rumber Suret	•	Money market		
-			☐ Brokerage		
		•			
·-	City State ZIP Code		Other		
		•			
	•	XXXX-	Checking		\$
	Name of Financial Institution	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Savings		-
		•	Savings		
		4.1			
	Number Street		Money market		
·	Number Street		,		
	Number Street		☐ Brokerage		· ·
	-		,		
· ·	City State ZIP Code		☐ Brokerage ☐ Other		
. Do y	City State ZIP Code	year before you filed for bankru	☐ Brokerage ☐ Other	oox or other depository	for
. Do y	City State ZIP Code you now have, or did you have within 1	year before you filed for bankruj	☐ Brokerage ☐ Other	oox or other depository	for
seci	City State ZIP Code	year before you filed for bankru	☐ Brokerage ☐ Other	oox or other depository	for
Section 1	City State ZIP Code  you now have, or did you have within 1 urities, cash, or other valuables?	year before you filed for bankru	☐ Brokerage ☐ Other	oox or other depository	for
Section 1	City State ZIP Code  you now have, or did you have within 1 urities, cash, or other valuables? No		☐ Brokerage ☐ Other	in the second se	
Section 1	City State ZIP Code  you now have, or did you have within 1 urities, cash, or other valuables? No	year before you filed for bankrup Who else had access to it?	☐ Brokerage ☐ Other  otcy, any safe deposit b	in the second se	
Section 1	City State ZIP Code  you now have, or did you have within 1 urities, cash, or other valuables? No		☐ Brokerage ☐ Other  otcy, any safe deposit b	in the second se	Do you still have it?
Section 1	City State ZIP Code  you now have, or did you have within 1 urities, cash, or other valuables? No		☐ Brokerage ☐ Other  otcy, any safe deposit b	in the second se	Do you still have it?
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Section 1	City State ZIP Code  you now have, or did you have within 1 urities, cash, or other valuables?  No  Yes. Fill in the details.	Who else had access to it?	☐ Brokerage ☐ Other  otcy, any safe deposit b	in the second se	Do you still have it?
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Section 1	City State ZIP Code  you now have, or did you have within 1 urities, cash, or other valuables?  No  Yes. Fill in the details.  Name of Financial Institution	Who else had access to it?	☐ Brokerage ☐ Other  otcy, any safe deposit b	in the second se	Do you still have it?

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es. Fill in the details.	Who else has or had access to it?	Describe the contents	Do you st
			have it?
·			□ No
Name of Storage Facility	Name		Yes
			ļ
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Co	nda		
City State ZIP Co	A STATE OF THE PROPERTY OF THE		
Identify Property You H	loid or Control for Someone Else		•
hold in trust for someone. No Yes. Fill in the details.		Describe the property	Value
	Where is the property?	Describe the property	T
	· ,		e
Owner's Name		:	*
Number Street	Number Street		
Militer Speer	•	•	
•	<u> </u>		
	State 719 Code		****
	rironmental information	<b>e</b>	
Give Details About Enverence purpose of Part 10, the following vironmental law means any federa zardous or toxic substances, was cluding statutes or regulations core means any location, facility, or plize it or used to own, operate, or	rironmental information  g definitions apply:  al, state, or local statute or regulation conce tes, or material into the air, land, soil, surfac introlling the cleanup of these substances, w property as defined under any environmenta utilize it, including disposal sites.	rning pollution, contamination, releases of the water, groundwater, or other medium, rastes, or material.	f
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Desc Main

/	nit of any release of hazardous material?		
No	• • • • • • • • • • • • • • • • • • • •		
Yes. Fill in the details.	Governmental unit Enviro	nmental law, if you know it Date of no	otice
	And Age in the state of the sta		•
Name of site	Governmental unit		
Number Street	Number Street		
••	City State ZIP Code		
City State ZIP Cod	ie .		
-		amountal law? Include cottlements and orders	
yé you been a party in any judicial o	or administrative proceeding under any enviro	nmental law? Include settlements and orders.	
No			
Yes. Fill in the details.		Status o	of the
•	Court or agency	lature of the case case	
Case title	Court Name	☐ Pend	
	Court Manie	On a	appe
	Number Street	☐ Cond	clud
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b	Describe the nature of the busines	Employer Identification number  SS Denset include Social Security number of ITIN	- - -

		Describe the nature of the business	Employer Identification number  Do not include Social Security number or ITIN.
•	Business Name		EIN:
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		· ·	From To
	City State ZIP Code		
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28. Wit	hin 2 years before you filed for bankrup	tcy, did you give a financial statement to anyone a	bout your business? Include all financial
ins	titutions, creditors, or other parties.		:
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	Yes. Fill in the details below.		
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	Name .	MM/DD/1111	
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	old you attach additional pages to Your	Statement of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?
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· C	old you pay or agree to pay someone wh	o is not an attorney to help you fill out bankruptcy	forms?
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[	Yes. Name of person	Atta	claration, and Signature (Official Form 119).
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